U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Performance Report for Grants and Cooperative Agreements



Welcome

Welcome to the Bureau of Health Workforce's Performance Measures Handbook (BPMH)! This instruction manual has been carefully designed to assist your organization in completing the required Performance Report for Grants and Cooperative Agreements (PRGCA). Please read through this manual carefully, as it contains examples and a series of step-by-step instructions that will aid you in completing all required forms.

Please note the following:

- 1. All required performance measures are linked to the following legislative purpose(s) of the **COE** grant program:
 - o Increase the competitive applicant pool;
 - o Enhance student performance;
 - o Improve capacity for under-represented minority faculty development;
 - o Improve information/curriculum design;
 - o Facilitate faculty-student research; and
 - o Carry out student training in providing healthcare services to under-represented communities.
- 2. Data submitted by grantees of the program must cover all activities that took place between **July 01, 2015 June 30, 2016** (referred to as **Annual Performance Report**)
- 3. The PRGCA is due no later than August 01, 2016. Failure to submit a PRGCA by this date may place your grant in a noncompliant status.
- 4. Officials at the Health Resources and Services Administration (HRSA) will review and approve all PRGCA submitted by grantees. In the case that revisions are needed, you will be granted the ability to reenter the BPMH system, make corrections, and submit a revised PRGCA. All revisions must be resubmitted within five (5) business days of the initial request. Failure to resubmit a revised PRGCA within five (5) business days may place your grant in a noncompliant status.

We appreciate your feedback and assistance during this process. All requests for technical assistance will be coordinated through the Call Center and responded to promptly. If you have any questions or require further assistance in completing your PRGCA, please visit the grants homepage or contact the HRSA Contact Center via:

- Phone at 877-Go4-HRSA/877-464-4772 or
- Click this link to send us your inquiry: <u>click here</u>.

Annual Performance Report
Academic Year 2015-2016
Performance Metrics and Evaluation Branch

Getting Started

The Office of Management and Budget (OMB) has issued a 3-year approval for the annual collection of performance measures across all grants and cooperative agreements funded through the Health Resources and Services Administration's Bureau of Health Workforce (BHW) (OMB # 0915-0061). The BPMH system has been significantly enhanced to incorporate all approved subforms, as well as increase system performance and functionality. Throughout the manual, there are several icons that identify tips and other important information which will assist you in completing each subform accurately (see below).



Marks a warning statement. Please read information in **bold** carefully in order to complete each subform accurately.



Marks a tip or important note for completing a specific Block or subform in the BPMH system.

Marks the end of a subform and provides instructions for initiating required validations checks.

Due to the nature of annual reporting, the BPMH system has been recently enhanced so as to prepopulate specific Blocks within certain subforms with data submitted in a previous reporting period. In addition, a "View Prior Period Data" link has been added at the top of each subform in order to provide you with easy access to data submitted by your organization in prior reporting periods.



Figure 1. Screenshot of View Prior Period Data Link

Getting Started - How Performance Measure Data Fields Are Identified in the Forms

No.	Type of Training Program	Trainees by Training Category		Attr	ition	
		Enter # of Enrollees	Enter # of Graduates	Enter# of Individuals who left the Program before Completion	Enter # of URM who left the Program before Completion	
	(1)	(2) Block 1	(5) Block 4	(7) Block 6	(8) Block 6a	Column Number
1	Degree/Diploma MD/MPH Health Policy & Management	20	5	1	0	Block Number

Figure 2. Example of Performance Measures Data Table

There are two (2) types of data entry field identifiers. Each data entry field in a performance measure is identified with both types of numbers when the measure appears like the example in the above Figure.

Column Number: The first is a Column number. It is contained in parentheses above the Block number. Column numbers are unique to the field in a particular form and are used to identify error messages. If you receive an error message, it will refer to a Column Number. In that circumstance, find the Column number in the form to locate the error. Data fields that are prepopulated may only be identified with a Column number as shown in Column #1 in the above Figure.

Block Numbers: The second type of identifier is a Block number. Block numbers are also unique to a data entry field and correspond to the paper version of the performance measures. If you print the performance measures or received paper copies, the data fields are identified with a Block number. The Block numbers here in the EHB are the same as what appears in the paper copies of the performance measures. Nearly all fields where you enter data will be identified with a Block number.

Getting Started: Browser Settings

Warning: Check your browser settings before beginning your PRGCA. Incompatible browsers or incorrect settings will cause forms to display incorrectly.

- HRSA's Electronic Handbook system (EHB) is compatible only with certain Internet browsers that have specific settings. Please check your settings by logging into EHB and clicking the 'Recommended Settings' tab that appears in the yellow banner at the top left of your home screen. The system will check your browser and its settings for compatibility.
- There are multiple checks that are performed, and you must receive green check marks next to each setting in order to proceed. The following link will direct you to a page that displays the list of the checks performed: **Recommended Settings**.
- Opening this link in your browser will automatically perform the recommended settings checks. Alternatively, you can access the recommended settings page in the EHBs system by clicking the 'Recommended Settings' tab on your EHBs home screen. It is highly recommended to check your settings prior to entering data in the BPMH system.
- Using different browsers or settings than what is described above may produce unpredictable results. If you find that you are unable to see dropdown menus, cannot enter data into a field, or a form is not appearing, you most likely have a browser compatibility problem.
- Please check these settings prior to calling the HRSA Call Center or your Government Project Officer. You may be asked to provide a screenshot showing the results of the 'Recommended Settings' tab.

Getting Started: Helpful Resources and Recommendations

The following is a list of resources and tips you may find helpful in the event you need assistance:

- 1. Begin PRGCA data entry early and submit your report prior to the deadline.
- 2. **Browser Settings**: Check your Internet browser and its settings by using 'Recommended Settings' tab on the EHB home screen within the yellow banner in the top left corner of the screen. Look for green check marks for all system requirements in order to meet system requirements and proceed.
- 3. **Reporting on Your Grant:** Several resources are available through HRSA's "Reporting on Your Grant" link http://bhw.hrsa.gov/grants/reporting/index.html including general EHB guidance as well as links to the performance measures and program manual.
- 4. **Resource Links**: Several resources are available via the 'Resource' tab on the EHB home screen including the following links:
 - o View Prior Period Data- Previously submitted PRGCA data are available in read-only mode
 - o Glossary- Current definitions of key terms
 - o Instruction Manual- Electronic copy of this program manual (can also be found on the HRSA.gov website)
- 5. Video Recordings:
 - o View recorded videos of how to enter data in the BPMH system: https://help.hrsa.gov/display/public/EHBSKBFG/BPMH+Videos
 - View the recorded TA webinar provided for your grant program. Please access the recording by using the link provided by your Government Project Officer.
- 6. **Grant Personnel:** Review your grant personnel listed in EHB and update this list as necessary. Ensure that listed personnel have appropriate authorizations (i.e., PRGCA submission, etc.). Make sure you have a backup person in place to submit your report!
- 7. **Sequence of Forms:** Complete PRGCA forms in the order they appear (i.e., complete EXP-1 prior to EXP-2; EXP-2, prior to EXP-3)
- 8. **Saving and Validating:** You must click 'Save and Validate' in order to move to the next form. Save your work frequently (every 15-20 minutes) and print a hard copy of your report prior to submission.
- 9. **HRSA Call Center:** If you need additional assistance, contact the HRSA Call Center using the contact information below. If you have contacted the Call Center and are waiting for a reply, you should follow-up with them 48 hours after the initial contact. Have your ticket number ready (the same ticket number will be used at all tier levels now). Do not wait for the Call Center to return a phone call or email.
 - o Phone at 877-Go4-HRSA/877-464-4772; or
 - o Click this link to send us your inquiry: click here.
- 10. Government Project Officers: Contact your Government Project Officer if you need further assistance.

Order of Required Forms

The following table shows the order that subforms will appear throughout the BPMH system for your specific grant program. Please note that clicking on the "Save and Validate" button at the end of each subform will cause the system to check all Blocks for errors and route you to the next required subform on the list. If you need to go back to any subform for any reason, simply click on the Form ID on the left sidebar of the Electronic Handbook (EHB). Please note that changing data that has already been saved will require you to click on the "Save and Validate" button and go through the validation process once more.

Order	Type of Form	Parent Form	Form ID	Applicable Grant Purpose(s)
1	Setup Form	Setup Forms	Grant Purpose	
2	Setup Form	Setup Forms	Training Program	COE-1,COE-2,COE-5
3	Setup Form	Setup Forms	Faculty Development	COE-3,COE-4
4	Performance Data Form	Program Characteristics-PC Subforms	PC-3	COE-1,COE-2,COE-5
5	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	LR-1a	COE-1,COE-2,COE-5
6	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	LR-2	COE-1,COE-2,COE-5
7	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	DV-1	COE-1,COE-2,COE-5

Order	Type of Form	Parent Form	Form ID	Applicable Grant Purpose(s)
8	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	DV-2	COE-1,COE-2,COE-5
9	Performance Data Form	Legislative Requirements & Demographic Variables-LR and DV Subforms	DV-3	COE-1,COE-2,COE-5
10	Performance Data Form	mance Data Individual Characteristics-INDGEN Subforms		COE-1,COE-2,COE-5
11	Performance Data Individual Characteristics-INDGEN Subforms Form		INDGEN-PY	COE-1,COE-2,COE-5
12	Performance Data Form	Experiential Characteristics-EXP Subforms	EXP-1	COE-5
13	Performance Data Form	Experiential Characteristics-EXP Subforms	EXP-2	COE-5
14	Performance Data Form	Experiential Characteristics-EXP Subforms	EXP-3	COE-5
15	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-1	COE-6
16	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-1a	COE-6
17	Performance Data Form	Course Development and Enhancement-CDE Subforms	CDE-2	COE-6

34.040	TOT HEARTH WORKHOICE			
Order	Type of Form	Parent Form	Form ID	Applicable Grant Purpose(s)
18	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-1a	COE-3
19	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-1b	COE-3
20	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-2a	COE-3
21	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-2b	COE-3
22	Performance Data Form	Faculty Development, Instruction, and Recruitment-FD Subforms	FD-3	COE-4

Grant Purpose – Setup

Selecting Grant Purpose(s)

To configure the BPMH system, please complete the Grant Purpose Setup form by selecting the specific type(s) of activities that were supported with grant funds during the annual reporting period (**July 01, 2015 - June 30, 2016**).

Grant Purpose	Select
COE-1: Increase the competitive applicant pool	
COE-2: Enhance student performance	2 0
COE-3: Improve the capacity for faculty development	Ø
COE-4: Facilitate faculty and student research	
COE-5: Carry out student training in providing health care services	Ø
COE-6: Improve information/curriculum design	☑

Figure 3. Selecting Grant Purpose(s)

Warning: Selections made in this form will affect the types of subforms and/or drop-down menu options that will appear throughout the BPMH system.

Warning: Some options in the Grant Purpose form will be automatically selected based on information provided in a previous reporting period. Unselecting a grant purpose will cause related forms and data to be deleted. If you need to unselect a grant purpose, contact your project officer first to ensure you do not unnecessarily lose any data.

To Complete the Form: Click on "Save and Validate" on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Training Program - Setup

Training Program Setup - Selecting Type of Training Program

Purpose: The Training Program Setup form will configure all subsequent subforms specific to structured training programs.



Figure 4. Training Program Setup - Selecting Type of Training Program

Select Type of Training Program Offered: Select the type of training program offered through the grant during the current annual reporting period by clicking on the drop-down menu next to "Select Type of Training Program Offered" and choosing the following option:

• Non-degree structured training program (Structured)

Warning: If you have no NEW structured training programs to add, proceed to the manual section entitled "Training Program Setup: Final Steps."

Training Program Setup - Loading Program Details

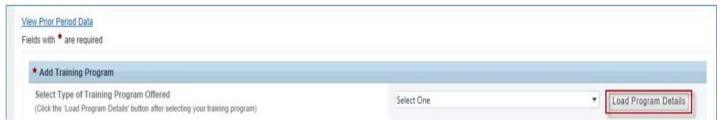


Figure 5. Training Program Setup - Loading Program Details

Click on the "Load Program Details" button. This will activate additional drop-down menus specific to the type of training program selected.

Training Program Setup - Adding Structured Training Program



Figure 6. Training Program Setup - Adding Structured Training Program

For a Non-degree bearing Structured or Unstructured Training Program, Select Type of Training Activity: Select the type of training activity by clicking on the drop-down menu and choosing one of the following options:

- Health Careers Enrichment Activities for URM
- Post-Baccalaureate Program
- Saturday Academy

- High School Academy Enrichment
- Pre-Matriculation Program
- Summer Program

For a Non-degree bearing Structured or Unstructured Training Program, Enter Name of Training Activity:

- Click on the "Add Record" button to save your entry.
- Repeat the first step and this step to capture all structured training programs offered during the annual reporting period

Training Program Setup - Adding Unstructured Training Program



Figure 7. Training Program Setup - Adding Unstructured Training Program

For a Non-degree bearing Structured or Unstructured Training Program, Select Type of Training Activity: Select the type of training activity by clicking on the drop-down menu and choosing one of the following options:

- Health Careers Enrichment Activities for URM
- Post-Baccalaureate Program
- Saturday Academy

- High School Academy Enrichment
- Pre-Matriculation Program
- Summer Program

For a Non-degree bearing Structured or Unstructured Training Program, Enter Name of Training Activity:

- Click on the "Add Record" button to save your entry.
- Repeat the first step and this step to capture all unstructured training programs offered during the annual reporting period

Training Program Setup - Selecting Training Activity Status

No.	Record Status	Training Program (1)	Select Training Activity Status in the Current Reporting Period (2)
1	Prior Record	Structured Summer Program ActivityName1	Ongoing
2	New Record	Structured Summer Program ActivityName2	Complete

Figure 8. Training Program Setup - Selecting Training Activity Status

Select Training Activity Status in the Current Reporting Period: Select the status of each training program at the end of the current reporting period(i.e. June 30, 2016) by choosing one of the options below:

- Active
- Complete
- Inactive
- Ongoing

Note: Select Ongoing if a training program that did not conclude by June 30, 2016.

Note: Select Complete if a training program that concluded at some point during the current reporting period (July 01, 2015 - June 30, 2016).

To Complete the Form: Click on "Save and Validate" on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Faculty Development – Setup

Selecting Faculty Development Activities

Purpose: The Faculty Development Setup form will configure all subforms specific to faculty development.

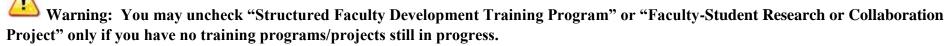
Faculty Development Activities	Select
Structured Faculty Development Training Program	abla
Faculty Development Activity	abla
Faculty-Student Research or Collaboration Project	

Figure 9. Selecting Faculty Development Activities

Select the type(s) of faculty development activities supported with grant funds during the current reporting period. Options on the Faculty Setup form will be automatically pre-selected if you have previously reported one or more training programs or activities through the FD-1a, FD-2a, or FD-3 subforms.



Warning: You may uncheck "Faculty Development Activity" if you have nothing to report.





Reference: Refer to the glossary for a definition of each type of faculty development activity.

To Complete the Form: Click on "Save and Validate" on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

PC-3: Program Characteristics – Non-degree bearing Structured Training Programs

PC-3 - Selecting Education Level(s) of Participants

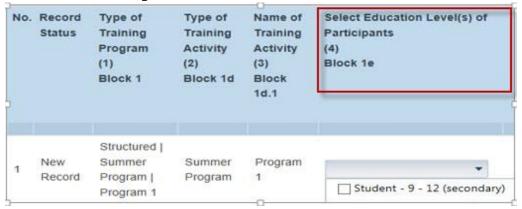


Figure 10. PC-3 - Selecting Education Level(s) of Participants

Select Education Level(s) of Participants: Complete Column 4 (Block 1e) by selecting the education level(s) of participants who participated in each structured training program during the current reporting period. Choose all that apply from the following options:

- Behavioral Health Clinical Psychology
- Behavioral Health Marriage and Family Therapy
- Behavioral Health -Pastoral/Spiritual Care
- Dentistry Endodontic Dentistry
- Dentistry Orthodontic Dentistry
- Dentistry Pediatric Dentistry
- Dentistry Public Health Dentistry
- Medicine Allergy and Immunology
- Medicine Dermatology
- Medicine General Preventive Medicine
- Medicine Integrative Medicine

- Behavioral Health Clinical Social Work
- Behavioral Health Other Psychology
- Dentistry Dental Assistant
- Dentistry General Dentistry
- Dentistry Other
- Dentistry Periodontic Dentistry
- Dentistry Radiology Dentistry
- Medicine Anesthesiology
- Medicine Emergency Medicine
- Medicine Geriatric Psychiatry
- Medicine Internal Medicine
- Medicine Medical Genetics
- Medicine Nuclear Medicine

- Behavioral Health Counseling Psychology
- Behavioral Health Other Social Work; Substance Abuse/Addictions Counseling
- Dentistry Dental Hygiene
- Dentistry Oral Surgery Dentistry
- Dentistry Pathology Dentistry
- Dentistry Prosthodontic Dentistry
- Medicine Aerospace Medicine
- Medicine Colon and Rectal Surgery
- Medicine Family Medicine
- Medicine Geriatrics
- Medicine Internal Medicine/Family Medicine
- Medicine Neurological Surgery
- Medicine Obstetrics and Gynecology
- Medicine Orthopaedic Surgery

- Medicine Internal Medicine/Pediatrics
- Medicine Neurology
- Medicine Occupational Medicine
- Medicine Other
- Medicine Physical Medicine and Rehabilitation
- Medicine Preventive Medicine/Aerospace Medicine
- Medicine Preventive Medicine/Occupational Medicine
- Medicine Psychiatry
- Medicine Surgery General
- Medicine Urology
- Nursing CNL Generalist
- Nursing CNS Geropsychiatric
- Nursing CNS Psychiatric/Mental health
- Nursing Community health nursing
- Nursing NP Acute care adult gerontology
- Nursing NP Adult gerontology
- Nursing NP Family
- Nursing NP Neonatal
- Nursing Nurse administrator
- Nursing Nurse informaticist
- Nursing Public health nurse
- Other Allied Health
- Other Direct Service Worker
- Other Health Education Specialist
- Other Medical Assistant
- Other Occupational Therapy
- Other Pharmacy
- Other Profession Not Listed

- Medicine Ophthalmology
- Medicine Otolaryngology
- Medicine Plastic Surgery
- Medicine Preventive Medicine/Family Medicine
- Medicine Preventive Medicine/Pediatrics
- Medicine Radiation Oncology
- Medicine Thoracic Surgery
- Medicine Vascular Surgery Integrated
- Nursing CNS Adult gerontology
- Nursing CNS Neonatal
- Nursing CNS Women's health
- Nursing Home Health Aide
- Nursing NP Acute care pediatric
- Nursing NP Adult Psychiatric/Mental health
- Nursing NP Family Psychiatric/Mental Health
- Nursing NP Pediatrics
- Nursing Nurse anesthetist
- Nursing Nurse midwife
- Nursing Registered Nurse
- Other Chiropractor
- Other Facility Administrator
- Other Health Informatics/Health Information Technology
- Other Midwife (non-nurse)
- Other Office/Support Staff
- Other Physical Therapy
- Other Respiratory Therapy
- Physician Assistant
- Public Health Environmental

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- Medicine Pathology Anatomical and Clinical
- Medicine Plastic Surgery Integrated
- Medicine Preventive Medicine/Internal Medicine
- Medicine Preventive Medicine/Public Health
- Medicine Radiology Diagnostic
- Medicine Thoracic Surgery Integrated
- Nursing Alternative/Complementary Nursing
- Nursing CNS Family
- Nursing CNS Pediatrics
- Nursing CNS Women's health and pediatrics
- Nursing Licensed practical/vocational nurse (LPN/LVN)
- Nursing NP Adult
- Nursing NP Emergency care
- Nursing NP Geropsychiatric
- Nursing NP Women's health
- Nursing Nurse educator
- Nursing Other (e.g.; CNA; PCA)
- Nursing Researcher/Scientist
- Other Community Health Worker
- Other First Responder/EMT
- Other Lay and Family Caregiver
- Other Nutritionist
- Other Optometry
- Other Podiatry
- Other Speech Therapy
- Public Health Biostatistics
- Public Health Epidemiology
- Public Health Injury Control & Prevention
- Student Alternative/Complementary Nursing
- Student CNL Generalist
- Student CNS Geropsychiatric
- Student CNS Psychiatric/Mental health

- Other Veterinary Medicine
- Public Health Disease Prevention
 & Health Promotion
- Public Health Health Policy & Management
- Public Health Social & Behavioral Sciences
- Student Certified Nursing Assistant
- Student CNS Adult gerontology
- Student CNS Neonatal
- Student CNS Women's health
- Student Dental Assistant
- Student Diploma/Certificate
- Student Graduate Nursing Doctorate
- Student Graduate Other Behavioral Health
- Student Graduate Radiological Assistant
- Student Licensed Practical/Vocational Nurse (LPN/LVN)
- Student Midwife (non-nurse)
- Student NP Adult
- Student NP Child/Adolescent Psychiatric/Mental Health
- Student NP Family Psychiatric/Mental Health
- Student NP Other advanced nurse specialists
- Student Nurse Administrator
- Student Nurse midwife
- Student Occupational Therapy
- Student Physical Therapy

Health

- Public Health Infectious Disease Control
- Student 9 12 (secondary)
- Student Chiropractic School
- Student CNS Family
- Student CNS Pediatrics
- Student CNS Women's health and pediatrics
- Student Dental Hygiene
- Student Graduate Allied Health
- Student Graduate Nursing Masters
- Student Graduate Psychology
- Student Graduate Social Work
- Student Medical Assistant
- Student NP Acute care adult gerontology
- Student NP Adult gerontology
- Student NP Emergency care
- Student NP Geropsychiatric
- Student NP Pediatrics
- Student Nurse Anesthetist
- Student Nurse Researchers/Scientists
- Student Optometry
- Student Physician Assistant
- Student Public Health Nurse
- Student Speech Therapy
- Student Undergraduate Other
- Student Undergraduate Radiological Technician

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- Student Community Health Nursing
- Student Dental School
- Student Graduate Clinical Laboratory Services
- Student Graduate Other
- Student Graduate Public Health
- Student Home Health Aide
- Student Medical School
- Student NP Acute care pediatric
- Student NP Adult Psychiatric/Mental health
- Student NP Family
- Student NP Neonatal
- Student NP Women's health
- Student Nurse Educator
- Student Nursing Informatics
- Student Pharmacy School
- Student Podiatry School
- Student Registered nurse (RN)
- Student Undergraduate Allied Health
- Student Undergraduate Public Health

- Student Post-high school / Precollege
- Student Rehabilitation Therapy
- Student Undergraduate Clinical Laboratory Services
- Student Undergraduate Radiological Assistant

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PC-3 - Entering Length of Training Program

No	Status	Type of Training Program (1) Block 1	Type of Training Activity (2) Block 1d	Name of Training Activity (3) Block 1d.1	Select Education Level(s) of Participants (4) Block 1e	Enter Length of Training Program in Clock Hours (5) Block 1f
1	New Record	Structured Summer Program Program 1	Summer Program	Program 1	•	

Figure 11. PC-3 - Entering Length of Training Program

Enter Length of Training Program in Clock Hours: Enter the duration, in clock hours, of each structured training program during the current reporting period by clicking on the drop-down menu in Column 5 (Block 1f).

Note: For training programs less than one (1) hour, provide a decimal value by dividing the total number of minutes the course lasted by 60 (e.g., a 15-minute course would entered as 15/60 = .25).

PC-3 - Selecting Whether Clinical or Practicum Training Was Offered

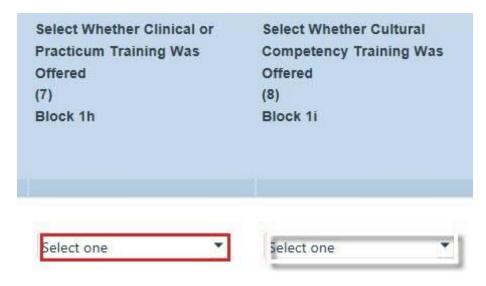


Figure 12. PC-3 - Selecting Whether Clinical or Practicum Training Was Offered

Select Whether Clinical or Practicum Training Was Offered: Select whether each structured training program included a clinical training or practicum component by choosing one of the following options from the drop-down menu under Column 7 (Block 1h):

- Yes
- No

PC-3 - Selecting Whether Cultural Competency Training Was Offered

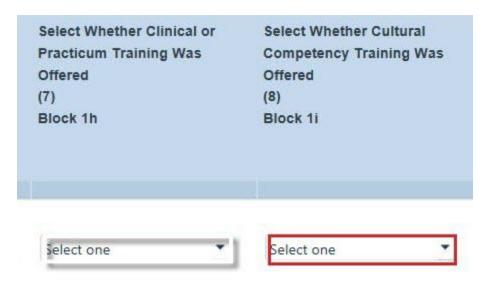


Figure 13. PC-3 - Selecting Whether Cultural Competency Training Was Offered

Select Whether Cultural Competency Training Was Offered: Select whether each structured training program provided participants with cultural competency-related training by choosing one of the following options from the drop-down menu under Column 8 (Block 1i):

- Yes
- No

PC-3 - Selecting Type(s) of Partners/Consortia

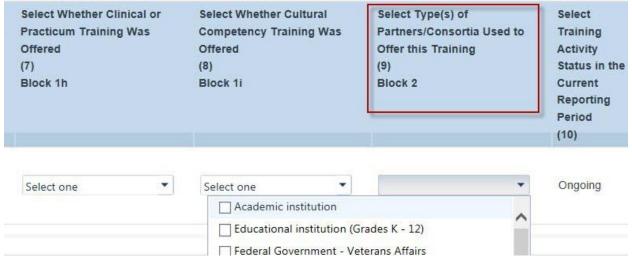


Figure 14. PC-3 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia Used to Offer this Training: Select the type(s) of partnerships or consortia established for the purposes of offering each structured training program during the current reporting period by clicking on the drop-down menu in Column 9 (Block 2) and choosing all that apply from the following options:

- Academic department outside the institution
- Alzheimer's Association/Chapters
- Area Agencies on Aging
- Day and home care programs (i.e. Home Health)
- Federal Government AHRQ
- Federal Government FDA
- Federal Government Other HHS Agency/Office
- Federal Government -Other
- Geriatric Behavioral or Mental Health

- Academic department within the institution
- Alzheimer's Disease Resource Centers
- Community based health center (e.g.; free clinic)
- Educational institution (Grades K 12)
- Federal Government CDC
- Federal Government IHS
- Federal Government Other HRSA Program
- FQHC or look-alike
- Geriatric consultation services

- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Community Health Center (CHC)
- Federal Government Veterans Affairs
- Federal Government Department of Defense/Military
- Federal Government NIH
- Federal Government SAMHSA
- Geriatric ambulatory care and comprehensive units
- Health department Local
- Health insurance/Healthcare Provider Group

Units

- Health department State
- Hospice
- Long-term care facility
- Nonprofit organization (non faith based)
- Other
- Professional Associations
- State Government

- Health department Tribal
- Hospital
- No partners/consortia used
- Nurse managed health clinic
- Physical therapy/Rehabilitation center
- Quality improvement organization
- Tribal Government

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(e.g.; PPO/HMO)

- Local Government
- Nonprofit organization (faith based)
- Nursing home
- Private/For profit organization
- Senior Center
- Tribal Organization

Warning: You may not select "No partners/consortia used" in combination with any other option.

To Complete the Form: Click on "Save and Validate" on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Legislative Requirements & Demographic Variables—LR and DV Subforms LR and DV - Introduction

Warning: You must complete a LR-1, LR-2, DV-1, DV-2, and DV-3 subform for each type of training program supported through the grant during the annual reporting period.

LR-1a: Trainees by Training Category

LR-1 - Entering Enrollees Count



Warning: Report counts of enrollees and program completers separately (i.e., program completers are NOT a subset of enrollees).

No.	Record Status	Type of Training Program	Trainees by Training Category		Attrition		Select Training Activity Status in
			Enter # of Enrollees	Enter # of Program Completers	Enter # of Individuals who left the Program before Completion	Enter# of URM who left the Program before Completion	the Current Reporting Period
		(1)	(2) Block 1	(6) Block 5	(7) Block 6	(8) Block 6a	(16)
1	Prior Record	Structured Saturday Academy ActivityName1					Ongoing
2	Prior Record	Structured Summer Program ActivityName2					Complete
3	New Record	Structured Saturday Academy ActivityName3					Ongoing
4	New Record	Structured Summer Program ActivityName4		5.		*	Complete

Figure 15. LR-1 - Entering Enrollees Count

Trainees by Training Category: Enter # of Enrollees: For ongoing programs, enter the number of students who participated in each structured training program in the textbox in Column 2 (Block 1).

Warning: Do not count individuals who permanently left a training program before completion during the annual reporting period Columns 2 or 6 (Blocks 1 and 5). These individuals will be captured separately in Column 7 (Block 6).

Note: For Completed Programs, enter a zero ("0") in Column 2 (Block 1)

LR-1 - Entering Program Completers Count



Warning: Report counts of enrollees and program completers separately (i.e., program completers are NOT a subset of enrollees).

No.	Record Status	Type of Training Program	Trainees by Training Category		Attri	Select Training Activity Status in	
			Enter # of Enrollees	Enter # of Program Completers	Enter # of Individuals who left the Program before Completion	Enter# of URM who left the Program before Completion	the Current Reporting Period
		(1)	(2) Block 1	(6) Block 5	(7) Block 6	(8) Block 6a	(16)
1	Prior Record	Structured Saturday Academy ActivityName1					Ongoing
2	Prior Record	Structured Summer Program ActivityName2					Complete
3	New Record	Structured Saturday Academy ActivityName3					Ongoing
4	New Record	Structured Summer Program ActivityName4				**	Complete

Figure 16. LR-1 - Entering Program Completers Count

Trainees by Training Category: Enter # of Program Completers: For completed programs, *e*nter the number of students who completed each structured training program in the textbox in Column 6 (Block 5).

Warning: Do not count individuals who permanently left a training program before completion during the annual reporting period Columns 2 or 6 (Blocks 1 and 5). These individuals will be captured separately in Column 7 (Block 6).



Note: For ongoing programs, enter a zero ("0") in Column 6 (Block 5).

LR-1 - Entering Attrition Information



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

No.	Record Status	Type of Training Program	Trainees by Training Category		Attrition		Select Training Activity Status in
			Enter # of Enrollees	Enter # of Program Completers	Enter # of Individuals who left the Program before Completion	Enter# of URM who left the Program before Completion	the Current Reporting Period
		(1)	(2) Block 1	(6) Block 5	(7) Block 6	(8) Block 6a	(16)
1	Prior Record	Structured Saturday Academy ActivityName1					Ongoing
2	Prior Record	Structured Summer Program ActivityName2					Complete
3	New Record	Structured Saturday Academy ActivityName3					Ongoing
4	New Record	Structured Summer Program ActivityName4				-	Complete

Figure 17. LR-1 - Entering Attrition Information

Attrition: Enter # of Individuals who left the Program before Completion: Enter the number of students who permanently left each structured training program before completion during the current annual reporting period in the textbox in Column 7 (Block 6).

Attrition: Enter # of URM who left the Program before Completion: Of the individuals reported in Column 7 (Block 6), enter the number of underrepresented minority students who permanently left each structured training program before completion during the current annual reporting period in the textbox in Column 8 (Block 6a).



Note: Counts reported in Column 8 (Block 6a) are a subset of those reported in Column 7 (Block 6).

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

LR-2: Trainees by Age & Sex

LR-2 - Entering Enrollees Count by Age and Gender



Warning: Report counts of enrollees and program completers separately (i.e., program completers are NOT a subset of enrollees).

Type of Training Program	Age Group of	Sex: Male		Sex:	Female	Sex: Not Reported		
(1)	Trainees (2)	Enter # of Enrollees (3) Blocks 1-6	Enter # of Program Completers (7) Blocks 49-54	Enter # of Enrollees (8) Blocks 7-12	Enter# of Program Completers (12) Blocks 55-60	Enter# of Enrollees (13)	Enter # of Program Completers (17)	
Structured Summer Program ULMSP	19 and Under							
Structured Summer Program ULMSP	20 - 29 years							
Structured Summer Program ULMSP	40 - 49 years							
Structured Summer Program ULMSP	30 - 39 years		Ĭ.					
Structured Summer Program ULMSP	50 - 59 years							
Structured Summer Program ULMSP	Age Not Reported							

Figure 18. LR-2 - Entering Enrollees Count by Age and Gender

Sex: Male: Enter # of Enrollees: For each age group, enter the number of students who participated in each structured training program and were Males in Column 3 (Blocks 1-6). If there were no students in a specific age group, or if the program was completed. enter a zero ("0") in the appropriate sex/age block.

Sex: Female: Enter # of Enrollees: For each age group, enter the number of students who participated in each structured training program and were Females in Column 8 (Blocks 7-12). If there were no students in a specific age group, or if the program was completed. enter a zero ("0") in the appropriate sex/age block.

Sex: Not Reported: Enter # of Enrollees: Enter the number of sex not reported students, by age group, enrolled in each training program during the current reporting period in the textboxes under Column 13. If there were no students in a specific age group, or if the program was completed. enter a zero ("0") in the appropriate sex/age block.

Note: The total number of enrollees across Columns 3 and 8 must be equal to the total number of enrollees entered in LR-1, Column 2 (Block I).

LR-2 - Entering Program Completers Count by Age and Gender

Type of Training Program (1)	Age Group of Trainees (2)	Sex: Male		Sex: Female		Sex: Not Reported	
		Enter # of Enrollees (3) Blocks 1-6	Enter # of Program Completers (7) Blocks 49-54	Enter # of Enrollees (8) Blocks 7-12	Enter # of Program Completers (12) Blocks 55-60	Enter # of Enrollees (13)	Enter # of Program Completers (17)
Structured Summer Program ULMSP	19 and Under						
Structured Summer Program ULMSP	20 - 29 years						
Structured Summer Program ULMSP	40 - 49 years						
Structured Summer Program ULMSP	30 - 39 years						
Structured Summer Program ULMSP	50 - 59 years						
Structured Summer Program ULMSP	Age Not Reported						

Figure 19. LR-2 - Entering Program Completers Count by Age and Gender

Sex: Male: Enter # of Program Completers: For each age group, enter the number of students who completed each structured training program and were Males- enter counts in Column 7 (Blocks 49-54). If there were no completers in a specific age group, or if the program was marked as "ongoing", enter a zero ("0") in the appropriate sex/age block.

Sex: Female: Enter # of Program Completers: For each age group, enter the number of students who completed each structured training program and were Females- enter counts in Column 12 (Blocks 55-60). If there were no completers in a specific age group, or if the program was marked as "ongoing", enter a zero ("0") in the appropriate sex/age block.

Sex: Not Reported: Enter # of Program Completers: Enter the number of not reported students, by age group, who completed each training program during the annual reporting period in the textboxes under Column 17. If there were no completers in a specific age group, or if the program was marked as "ongoing", enter a zero ("0") in the appropriate sex/age block.

Note: The total number of completers across Columns 12 and 17 must be equal to the total number of completers entered in LR-1.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

1).

DV-1: Trainees by Racial & Ethnic Background

DV-1 - Entering Enrollees Count by Race and Ethnicity

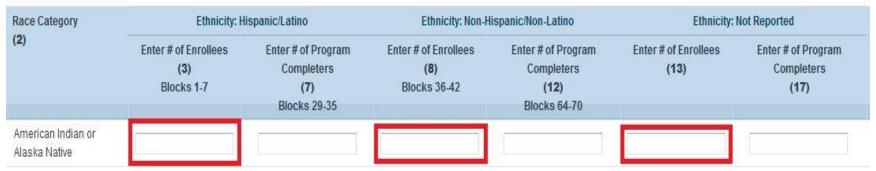


Figure 20. DV-1 - Entering Enrollees Count by Race and Ethnicity

Ethnicity: Hispanic/Latino: Enter # of Enrollees: For each racial category, enter the number of students who participated in each structured training program and were Hispanic/Latino in Column 3 (Blocks 1-7). If there were no students in a specific racial category, or if the program was marked as complete, enter a zero ("0") in the appropriate ethnicity/race block.

Ethnicity: Non-Hispanic/Non-Latino: Enter # of Enrollees: For each racial category, enter the number of students who participated in each structured training program and were Non-Hispanic/Latino in Column 8 (Blocks 36-42). If there were no students in a specific racial category, or if the program was marked as complete, enter a zero ("0") in the appropriate ethnicity/race block.

Ethnicity: Not Reported: Enter # of Enrollees: Enter the number of not reported students by race who participated in each training program in Column 13. If there were no students in a specific racial category, or if the program was marked as complete, enter a zero ("0") in the appropriate ethnicity/race block.

Note: The total number of enrollees across Columns 3 and 8 must be equal to the total number of enrollees entered in LR-1, Column 2 (Block

DV-1 - Entering Program Completers Count by Race and Ethnicity

Race Category	Ethnicity: Hispanic/Latino		Ethnicity: Non-Hispanic/Non-Latino		Ethnicity: Not Reported	
(2)	Enter # of Enrollees (3) Blocks 1-7	Enter # of Program Completers (7) Blocks 29-35	Enter# of Enrollees (8) Blocks 36-42	Enter # of Program Completers (12) Blocks 64-70	Enter # of Enrollees (13)	Enter # of Program Completers (17)
American Indian or Alaska Native						

Figure 21. DV-1 - Entering Program Completers Count by Race and Ethnicity

Ethnicity: Hispanic/Latino: Enter # of Program Completers: For each racial category, enter the number of students who completed each structured training program and were Hispanic/Latino in Column 7 (Blocks 29-35).

Ethnicity: Non-Hispanic/Non-Latino: Enter # of Program Completers: For each racial category, enter the number of students who completed each structured training program and were Non-Hispanic/Latino in Column 12 (Blocks 64-70).

Ethnicity: Not Reported: Enter # of Program Completers: Enter the number of ethnicity not reported students by race who completed each training program during the current reporting period in the textboxes under Column 17.

Note: If there were no completers in a specific racial category, or if the program was marked as "ongoing", enter a zero ("0") in the appropriate ethnicity/race block.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

DV-2: Trainees from a Disadvantaged Background

DV-2 - Entering Enrollees Count from Disadvantaged Background

No.	Record	Type of Training Program	Enro	Enrollees		Program Completers	
	Status		Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM	Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM	Training Activity Status in the Current Reporting Period
		(1)	(2) Block 1	(3) Block 2	(10) Block 9	(11) Block 10	(12)
1	Prior Record	Structured Saturday Academy ActivityName1					Ongoing

Figure 22. DV-2 - Entering Enrollees Count from Disadvantaged Background

Enrollees: Enter Total # from Disadvantaged Background: Enter the total number of students from disadvantaged backgrounds who participated in each structured training program during the current reporting period in the textbox in Column 2 (Block 1).

Enrollees: Enter # from Disadvantaged Background who are not URM: Enter the total number of students from disadvantaged backgrounds who participated in each structured training program during the current reporting period and were NOT under-represented minorities in the textbox in Column 3 (Block 2).

Note: Counts reported in Column 3 (Block 2) are a subset of counts reported in Column 2 (Block 1).

Reference: Refer to the glossary for a definition of disadvantaged background and underrepresented minority.

DV-2 - Entering Program Completers Count from Disadvantaged Background

No.	Record Type of Training Program		Enro	llees	Program Completers		Select
	Status		Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM	Enter Total # from Disadvantaged Background	Enter # from Disadvantaged Background who are not URM	Training Activity Status in the Current Reporting Period
		(1)	(2) Block 1	(3) Block 2	(10) Block 9	(11) Block 10	(12)
1	Prior Record	Structured Saturday Academy ActivityName2					Complete

Figure 23. DV-2 - Entering Program Completers Count from Disadvantaged Background

Program Completers: Enter Total # from Disadvantaged Background: Enter the total number of students from disadvantaged backgrounds who completed each structured training program during the current reporting period in the textbox in Column 10 (Block 9).

Program Completers: Enter # from Disadvantaged Background who are not URM: Next, enter the total number of students from disadvantaged backgrounds who completed each structured training program during the current reporting period and were NOT underrepresented minorities in the textbox in Column 11 (Block 10).

Note: Counts reported in Column 11 (Block 10) are a subset of counts reported in Column 10 (Block 9).

Reference: Refer to the glossary for a definition of disadvantaged background and underrepresented minority.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

DV-3: Trainees from a Rural Background

DV-3 - Entering Enrollees Count from Rural Residential Background

No.	Record Status		Trainees from Rural R	Select Training Activity Status in	
			Enter # of Enrollees from a Rural Background	Enter # of Program Completers from a Rural Background	the Current Reporting Period
		(1)	(2) Block 1	(6) Block 5	(7)
1	Prior Record	Structured Summer Program ActivityName1			Ongoing

Figure 24. DV-3 - Entering Enrollees Count from Rural Residential Background

Trainees from Rural Residential Background: Enter # of Enrollees from a Rural Background: Enter the total number of students from a rural residential background who participated in each structured training program during the current reporting period in the textbox in Column 2 (Block 1).



Reference: Refer to the glossary for a definition of rural residential background.

DV-3 - Entering Program Completers Count from Rural Residential Background

No.	. Record Status		Trainees from Rural R	Select Training Activity Status in	
			Enter # of Enrollees from a Rural Background	Enter # of Program Completers from a Rural Background	the Current Reporting Period
		(1)	(2) Block 1	(6) Block 5	(7)
1	Prior Record	Structured Summer Program ActivityName2			Complete

Figure 25. DV-3 - Entering Program Completers Count from Rural Residential Background

Trainees from Rural Residential Background: Enter # of Program Completers from a Rural Background: Enter the total number of students from a rural residential background who completed each structured training program during the annual reporting period in the textbox in Column 10 (Block 9).

Reference: Refer to the glossary for a definition of rural residential background.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Health Resources and Services Administration Bureau of Health Workforce

IND-GEN: Individual Characteristics

INDGEN - Introduction

Notice to Grantees about Individual-level Data:

- 1. You must complete an IND-GEN record for each individual who received a BHW-funded financial award during the annual reporting period. In addition, annual updates are required for individuals who were previously reported on IND-GEN and were not marked as having graduated, completed or attrited from their training program by **June 30, 2016**.
- 2. For prior records, the BPMH system will prepopulate certain blocks in the INDGEN subform with data submitted in previous reporting periods for each individual. All other fields must be updated on an annual basis until the individual graduates from, completes, or permanently leaves their training program.
- 3. The IND-GEN subform will automatically calculate and display read-only columns labeled "Academic Year Total" and "Cumulative BHW Financial Award Total."
 - a. The Academic Year Total will display the amount entered for a given academic year.
 - b. The Cumulative BHW Financial Award Total will sum all amounts entered for this individual in the BMPH system.
- 4. Individuals who were reported as having graduated from or completed their training program in the previous reporting period will automatically be transferred from IND-GEN to the INDGEN-PY subform after one (1) full calendar year has passed from the moment of graduation/completion. At that point, 1-year post-graduation/completion employment status data must be provided for each individual.

IND-GEN - Setup

To provide individual-level data about students or faculty who received BHW-funded financial awards during the current annual reporting period or to provide updates about individuals previously reported on IND-GEN, click "Yes" to the initial setup question. Clicking "Yes" will activate the embedded Excel® form that will allow you to begin data entry.

Do you have either a) students, trainees or faculty who received direct financial support (e.g., scholarships, stipends, loans, loan repayment) from a HRSA-funded grant OR b) updates to provide for students or trainees who received direct financial support in a previous reporting period? Yes

Yes (complete IND-GEN) No (click Save and Validate button to proceed to the next form)

Figure 26. IND-GEN - Setup

Warning: If you have used the INDGEN form before, this answer is pre-selected 'Yes' for you. You do not need to answer this question again. Please move ahead to the INDGEN form by using the form list located on the left side of your screen.

Warning: If you are unable to enter data into the INDGEN form, edit prior records, or see drop-down menus despite the question above being answered 'Yes', you have a browser compatibility problem. Please refer to the Getting Started-Browser Settings page at the beginning of this manual.



Warning: Gray fields in prior records cannot be edited.

IND-GEN - Selecting Type of Training Program

Record Status	Type of Training Program	Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex
necord Status	(1)	(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4
	Select one ▼				

Figure 27. IND-GEN - Selecting Type of Training Program

Type of Training Program: Select each individual's training program by clicking on the drop-down menu under the column labeled "Type of Training Program" and choosing one of the available options. The options available under "Type of Training Program" will prepopulate with information entered and saved in the Training Program Setup Form.

Note: The option for "Other" that is available in the drop-down menu under the column labeled "Type of Training Program" should only be selected for faculty who received a BHW-funded financial award during the annual reporting period for participating in faculty development activities or for faculty and students who received a BHW-funded stipend for participating in a faculty-student research project.

IND-GEN - Entering Trainee Unique ID

Type of Training Program	Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex
(1)	(2)	(3)	(4)	(5)
	Block 1	Block 2	Block 3	Block 4

Figure 28. IND-GEN - Entering Trainee Unique ID

Trainee Unique ID: Enter a seven (7) alphanumeric **unique identifier** for each individual in the textbox in Column 2 (Block 1).

Warning: It is the responsibility of each grantee to keep a log of all unique IDs used, as these will be required to provide annual updates for each individual and 1-year follow-up data for students.

IND-GEN - Selecting Individual's Training or Awardee Category

Type of Training Program	Trainee Unique ID	Select Individual's Training or Awardee Category
(1)	(2) Block 1	(3) Block 2
Select one		Select one

Figure 29. IND-GEN - Selecting Individual's Training or Awardee Category

Select Individual's Training or Awardee Category: Select each individual's training category by clicking on the drop-down menu under Column 3 (Block 2) and choosing one of the following options:

- Enrollee (campus-based only)
- Enrollee (distance learning only)
- Enrollee (hybrid)
- Faculty

IND-GEN - Selecting Individual's Enrollment/Employment Status

Type of Training Program	Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex
(1)	(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4
Select one		Select one		
			Select one Full-time Part-time	

Figure 30. IND-GEN - Selecting Individual's Enrollment/Employment Status

Select Individual's Enrollment / Employment Status: Select each individual's current enrollment or employment status by clicking on the drop-down menu under Block 3 and choosing one of the following options:

- Full-time
- On leave of absence
- Part-time
- Inactive

IND-GEN - Selecting Individual's Sex

Type of Training Program	Trainee Unique ID	Select Individual's Training or Awardee Category	Select Individual's Enrollment / Employment Status	Select Individual's Sex
(1)	(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4
Select one		Select one		

Figure 31. IND-GEN - Selecting Individual's Sex

Select Individual's Sex: Select each individual's sex by clicking on the drop-down menu under Block 4 and choosing one of the following options:

- Female
- Male
- Not Reported

Note: If "Not Reported" was selected for a record during a previous reporting period, you must provide the appropriate updated information in order to successfully submit your PRGCA.

IND-GEN - Selecting Individual's Age

Trainee Unique ID	Select Individual's Age	Select Individual's Ethnicity	Select Individual's Race
(2) Block 1	(6) Block 5	(7) Block 6	(8) Block 7
	26		
	27		

Figure 32. IND-GEN - Selecting Individual's Age

Select Individual's Age: Enter each individual's age at the end of the annual reporting period in the textbox under Column 6 (Block 5).

•	12	• 13	• 14
•	15	• 16	• 17
•	18	• 19	• 20
•	21	• 22	• 23
•	24	• 25	• 26
•	27	• 28	• 29
•	30	• 31	• 32
•	33	• 34	• 35
•	36	• 37	• 38
•	39	• 40	41
•	42	• 43	• 44
•	45	• 46	• 47
•	48	• 49	• 50
•	51	• 52	• 53
•	54	• 55	• 56
•	57	• 58	• 59
•	60	• 61	• 62
•	63	• 64	• 65
•	66	• 67	• 68

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- 69
- 70

• 71

- 72
- 73

- 74
- 75 Not Reported

IND-GEN - Selecting Individual's Ethnicity

Type of Training Program	Trainee Unique ID	Select Individual's Age	Select Individual's Ethnicity
(1)	(2) Block 1	(6) Block 5	(7) Block 6
Select one		14	
Select one		14	Select one Hispanic/Latino Non-Hispanic/Non-Lati

Figure 33. IND-GEN - Selecting Individual's Ethnicity

Select Individual's Ethnicity: Select each individual's ethnicity by clicking on the drop-down menu under Block 6 and choosing one of the following options:

- Hispanic/Latino
- Non-Hispanic/Non-Latino
- Not Reported

Wote: If "Not Reported" was selected for a record during a previous reporting period, you must provide the appropriate updated information in order to successfully submit your PRGCA.

IND-GEN - Selecting Individual's Race

Type of Training Program	Trainee Unique ID	Select Individual's Age	Select Individual's Ethnicity	Select Individual's Race
(1)	(2) Block 1	(6) Block 5	(7) Block 6	(8) Block 7
Select one		14		•

Figure 34. IND-GEN - Selecting Individual's Race

Select Individual's Race: Select each individual's race by clicking on the drop-down menu under Block 7 and choosing all that apply from the following options. You may select more than one (1) option for individuals of multiple races:

- American Indian or Alaska Native
- Black or African-American
- White

- Asian
- Native Hawaiian or Other Pacific Islander
- Not Reported

Warning: You may not select "Not Reported" in combination with any other option.

Note: If "Not Reported" was selected for a record during a previous reporting period, you must provide the appropriate updated information in order to successfully submit your PRGCA.

IND-GEN - Selecting if Individual is from a Rural Residential Background

Trainee Unique ID	Select Whether Individual is from a Rural Residential Background	Select Whether Individual is from a Disadvantaged Background	Select Individual's Veteran Statu
(2)	(9)	(10)	(11)
Block 1	Block 8	Block 9	Block 10

Figure 35. IND-GEN - Selecting if Individual is from a Rural Residential Background

Select Whether Individual is from a Rural Residential Background: Select whether each individual is from a rural residential background by clicking on the drop-down menu under Column 9(Block 8) and choosing **one** of the following options:

- Yes
- No
- Not Reported



Reference: Refer to the glossary for a definition of rural setting.

IND-GEN - Selecting if Individual is from a Disadvantaged Background

Trainee Unique ID	Select Whether Individual is from a Rural Residential Background	Select Whether Individual is from a Disadvantaged Background
(2) Block 1	(9) Block 8	(10) Block 9

Figure 36. IND-GEN - Selecting if Individual is from a Disadvantaged Background

Select Whether Individual is from a Disadvantaged Background: Select whether each individual is from a disadvantaged background by clicking on the drop-down menu under Column 10 (Block 9) and choosing **one** of the following options:

- Yes
- No
- Not Reported

Note: If "Not Reported" was selected for a record during a previous reporting period, you must provide the appropriate updated information in order to successfully submit your PRGCA.



Reference: Refer to the glossary for a definition of disadvantaged background.

IND-GEN - Selecting Individual's Veteran Status

Trainee Unique ID	Select Whether Individual is from a Rural Residential Background	Select Whether Individual is from a Disadvantaged Background	Select Individual's Veteran Status
(2) Block 1	(9) Block 8	(10) Block 9	(11) Block 10
			•

Figure 37. IND-GEN - Selecting Individual's Veteran Status

Select Individual's Veteran Status: Select each individual's current veteran status by clicking on the drop-down menu under Block 10 and choosing **one** of the following options:

- Active Duty Military
- Reservist
- Veteran Retired

- Individual is not a Veteran
- Veteran Prior Service
- Not Reported

Wote: If "Not Reported" was selected for a record during a previous reporting period, you must provide the appropriate updated information in order to successfully submit your PRGCA.



Reference: Refer to the glossary for a definition of the various types of veteran statuses.

IND-GEN - Entering BHW-Funded Financial Award Information



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Type of Training Program	Trainee Unique ID	Select Whether Individual Received BHW Financial Award?	Stipend
(1)	(2) Block 1	(12) Block 11	(13) Block 11
		Select one Yes No	

Figure 38. IND-GEN - Entering BHW-Funded Financial Award Information

Select Whether Individual Received BHW Financial Award?: Select whether each individual received a BHW-funded financial award during the annual reporting period by clicking on the drop-down menu in Column 12 (Block 11) and choosing one of the following options:

- Yes
- No

Enter Individual's Financial Award Amount (BHW funds only): Stipend:

- If the individual did receive a BHW-funded financial award, select "Yes" in Column 12 (Block 11) and enter the total amount of BHW dollars provided during the annual reporting period in the textbox in Column 13.
- If the individual did not receive a BHW-funded financial award, select "No" in Column 12 (Block 11) and enter "0" in the textbox in Column 13.

Note: The amount reported under the column labeled "Stipend" should be the total monies from the grant provided to an individual for the purposes of participating in the training program that was selected under the column labeled "Type of Training Program." The total amount reported should account for all BHW dollars including those applied to tuition, fees, and reasonable living expenses, as allowed by federal statutes

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and regulations. Do not include dollars that came from other sources of funding. If an individual participated in more than one (1) program and received stipends for each program, multiple entries on IND-GEN are required to capture participation and stipend amounts for each program separately.

IND-GEN - Entering # of Academic Years the Individual has Received BHW Funding

Type of Training Program	Trainee Unique ID	Enter # of Academic Years the Individual has Received BHW Funding	Select Individual's Academic or Training Year
(1)	(2) Block 1	(22) Block 12	(26) Block 15
		Select one	

Figure 39. IND-GEN - Entering # of Academic Years the Individual has Received BHW Funding

Enter # of Academic Years the Individual has Received BHW Funding: Select the cumulative number of academic years that each individual has received a BHW-funded financial award by clicking on the drop-down menu under Column 22 (Block 12) and choosing one of the following options:

- 1
- 2
- 3
- 4
- 5 or more

Note: The number of academic years receiving BHW-funded financial awards does not need to be consecutive; rather, the cumulative total number of years should be reported.

Whote: If an individual has received money for $\frac{1}{2}$ an academic year, please round up to the nearest whole number. For example, if a student or faculty member has received a financial award for $1\frac{1}{2}$ years, please enter 2 in Column 22 (Block 12).

Note: If an individual received a BHW-funded financial award for the first time during the current annual reporting period, select "1" under

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IND-GEN - Selecting Individual's Academic or Training Year

Select Individual's Academic or Training Year	Select Individual's Primary Discipline
(26) Block 15	(27) Block 16
N/A	

Figure 40. IND-GEN - Selecting Individual's Academic or Training Year

Select Individual's Academic or Training Year: Select each individual's current training year in the training program that was selected under the column labeled "Type of Training Program" by clicking on the drop-down menu under Column 26 (Block 15) and choosing one of the following options:

- Faculty
- Non-degree Training Program Year 2
- Non-degree Training Year 1
- N/A

IND-GEN - Selecting Individual's Primary Discipline

Select Individual's Academic or Training Year	Select Individual's Primary Discipline
(26) Block 15	(27) Block 16

Figure 41. IND-GEN - Selecting Individual's Primary Discipline

Select Individual's Primary Discipline: Select individual's profession and discipline by clicking on the drop-down menu in Column 27 (Block 16) and choosing one of the available options.

- Behavioral Health Clinical Psychology
- Behavioral Health Marriage and Family Therapy
- Behavioral Health -Pastoral/Spiritual Care
- Dentistry Dental Hygiene
- Dentistry Oral Surgery Dentistry
- Dentistry Pathology Dentistry
- Dentistry Prosthodontic Dentistry
- Medicine Aerospace Medicine
- Medicine Colon and Rectal Surgery
- Medicine Family Medicine
- Medicine Geriatrics
- Medicine Internal Medicine/Family Medicine
- Medicine Neurological Surgery
- Medicine Obstetrics and Gynecology

- Behavioral Health Clinical Social Work
- Behavioral Health Other Psychology
- Behavioral Health Psychology
- Dentistry Endodontic Dentistry
- Dentistry Orthodontic Dentistry
- Dentistry Pediatric Dentistry
- Dentistry Public Health Dentistry
- Medicine Allergy and Immunology
- Medicine Dermatology
- Medicine General Preventive Medicine
- Medicine Integrative Medicine
- Medicine Internal Medicine/Pediatrics
- Medicine Neurology
- Medicine Occupational Medicine
- Medicine Other
- Medicine Pediatrics
- Medicine Plastic Surgery Integrated

- Behavioral Health Counseling Psychology
- Behavioral Health Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry Dental Assistant
- Dentistry General Dentistry
- Dentistry Other
- Dentistry Periodontic Dentistry
- Dentistry Radiology Dentistry
- Medicine Anesthesiology
- Medicine Emergency Medicine
- Medicine Geriatric Psychiatry
- Medicine Internal Medicine
- Medicine Medical GeneticsMedicine Nuclear Medicine
- Medicine Ophthalmology
- Medicine Otolaryngology
- Medicine Physical Medicine and Rehabilitation

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- Medicine Orthopaedic Surgery
- Medicine Pathology Anatomical and Clinical
- Medicine Plastic Surgery
- Medicine Preventive Medicine/Family Medicine
- Medicine Preventive Medicine/Pediatrics
- Medicine Radiation Oncology
- Medicine Thoracic Surgery
- Medicine Vascular Surgery Integrated
- Nursing CNS Adult gerontology
- Nursing CNS Neonatal
- Nursing CNS Women's health
- Nursing Home Health Aide
- Nursing NP Acute care pediatric
- Nursing NP Adult Psychiatric/Mental health
- Nursing NP Family Psychiatric/Mental Health
- Nursing NP Pediatrics
- Nursing Nurse administrator
- Nursing Nurse educator
- Nursing Other (e.g., CNA, PCA)
- Nursing Researcher/Scientist
- Other Community Health Worker
- Other First Responder/EMT
- Other Home Health Aide
- Other Midwife (non-nurse)
- Other Office/Support Staff
- Other Physical Therapy
- Other Respiratory Therapy
- Physician Assistant

- Medicine Preventive
 Medicine/Internal Medicine
- Medicine Preventive Medicine/Public Health
- Medicine Radiology Diagnostic
- Medicine Thoracic Surgery Integrated
- Nursing Alternative/Complementary Nursing
- Nursing CNS Family
- Nursing CNS Pediatrics
- Nursing CNS Women's health and pediatrics
- Nursing Licensed practical/vocational nurse (LPN/LVN)
- Nursing NP Adult
- Nursing NP Emergency care
- Nursing NP Geropsychiatric
- Nursing NP Psychiatric/Mental health
- Nursing Nurse anesthetist
- Nursing Nurse informaticist
- Nursing Public health nurse
- Other Allied Health
- Other Direct Service Worker
- Other Health Education Specialist
- Other Lay and Family Caregiver
- Other Nutritionist
- Other Optometry
- Other Podiatry
- Other Speech Therapy
- Public Health Biostatistics
- Public Health Epidemiology
- Public Health Injury Control &

- Annual Performance Report Academic Year 2015-2016
- Medicine Preventive Medicine/Aerospace Medicine
- Medicine Preventive Medicine/Occupational Medicine
- Medicine Psychiatry
- Medicine Surgery General
- Medicine Urology
- Nursing CNL Generalist
- Nursing CNS Geropsychiatric
- Nursing CNS Psychiatric/Mental health
- Nursing Community health nursing
- Nursing NP Acute care adult gerontology
- Nursing NP Adult gerontology
- Nursing NP Family
- Nursing NP Neonatal
- Nursing NP Women's health
- Nursing Nurse Assistant/Patient Care Associate (PCA)
- Nursing Nurse midwife
- Nursing Registered Nurse
- Other Chiropractor
- Other Facility Administrator
- Other Health Informatics/Health Information Technology
- Other Medical Assistant
- Other Occupational Therapy
- Other Pharmacy
- Other Profession Not Listed
- Other Veterinary Medicine
- Public Health Disease Prevention & Health Promotion
- Public Health Health Policy & Management
- Public Health Social & Behavioral Sciences
- Student Certified Nursing Assistant

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- Public Health Environmental Health
- Public Health Infectious Disease Control
- Student 9-12 (secondary)
- Student Chiropractic School
- Student CNS Family
- Student CNS Pediatrics
- Student CNS Women's health and pediatrics
- Student Dental Hygiene
- Student Graduate Allied Health
- Student Graduate Nursing Masters
- Student Graduate Psychology
- Student Graduate Social Work
- Student Licensed Practical/Vocational Nurse (LPN/LVN)
- Student Midwife (non-nurse)
- Student NP Adult gerontology
- Student NP Emergency care
- Student NP Geropsychiatric
- Student NP Psychiatric/Mental health
- Student Nurse Anesthetist
- Student Nurse Researchers/Scientists
- Student Optometry
- Student Physician Assistant
- Student Public Health Nurse
- Student Undergraduate Allied Health
- Student Undergraduate Public

Prevention

- Student Alternative/Complementary Nursing
- Student CNL Generalist
- Student CNS Geropsychiatric
- Student CNS Psychiatric/Mental health
- Student Community Health Nursing
- Student Dental School
- Student Graduate Clinical Laboratory Services
- Student Graduate Other
- Student Graduate Public Health
- Student Home Health Aide
- Student Medical Assistant
- Student NP Acute care adult gerontology
- Student NP Adult Psychiatric/Mental health
- Student NP Family
- Student NP Neonatal
- Student NP Women's health
- Student Nurse Educator
- Student Nursing Informatics
- Student Pharmacy School
- Student Podiatry School
- Student Rehabilitation Therapy
- Student Undergraduate Clinical Laboratory Services
- Student Undergraduate Radiological Assistant

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- Student CNS Adult gerontology
- Student CNS Neonatal
- Student CNS Women's health
- Student Dental Assistant
- Student Diploma/Certificate
- Student Graduate Nursing Doctorate
- Student Graduate Other Behavioral Health
- Student Graduate Radiological Assistant
- Student K-8 (primary)
- Student Medical School
- Student NP Acute care pediatric
- Student NP Child/Adolescent Psychiatric/Mental Health
- Student NP Family Psychiatric/Mental Health
- Student NP Pediatrics
- Student Nurse Administrator
- Student Nurse midwife
- Student Occupational Therapy
- Student Physical Therapy
- Student Post high school / Pre college
- Student Speech Therapy
- Student Undergraduate Other
- Student Undergraduate Radiological Technician

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Note: Student-level disciplines, denoted with a prefix of "Student—" are intended only for students.



Note: Provider-level disciplines, denoted with a prefix containing a profession (e.g., "Nursing—") are intended only for faculty.

IND-GEN - Entering Training Information in a Primary Care Setting



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Tuno of Training			Training in a Primary Care Set
Type of Training Program	Trainee Unique ID	Select Whether Individual Received Training	Enter # of Contact Hours
(1)	(2) Block 1	(28) Block 17	(29) Block 17a
		Select one Yes No N/A	

Figure 42. IND-GEN - Entering Training Information in a Primary Care Setting

Training in a Primary Care Setting: Select Whether Individual Received Training: Select whether each student received clinical or experiential training in a primary care setting during the annual reporting period by clicking on the drop-down menu in Column 28 (Block 17) and choosing one of the following options:

- Yes
- No
- N/A

Training in a Primary Care Setting: Enter # of Contact Hours:

- If the student **did receive** clinical or experiential training in a primary care setting, **enter the total number of hours** spent in this type of setting during the annual reporting period in the textbox under Column 29 (Block 17a).
- If the student **did NOT receive** clinical or experiential training in a primary care setting, **leave the textbox blank** under Column 29 (Block 17a).



Warning: For Faculty, select "N/A" in the drop-down menu under Block 17.

IND-GEN - Entering Training Information in a Medically Underserved Area



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Tong of Testalog		Training in a Medically	Underserved Area
Type of Training Program	Trainee Unique ID	Select Whether Individual Received Training	Enter # of Contact Hours
(1)	(2) Block 1	(31) Block 18	(32) Block 18a
		Select one Yes No N/A	

Figure 43. IND-GEN - Entering Training Information in a Medically Underserved Area

Training in a Medically Underserved Area: Select Whether Individual Received Training: Select whether each student received clinical or experiential training in a medically-underserved community (MUC) during the annual reporting period by clicking on the drop-down menu in Column 31 (Block 18) and choosing one of the following options:

- Yes
- No
- N/A

Training in a Medically Underserved Area: Enter # of Contact Hours:

- If the student **did receive** clinical or experiential training in a medically-underserved community, **enter the total number of hours** spent in this type of setting during the annual reporting period in the textbox under Column 32 (Block 18a).
- If the student did **NOT** receive clinical or experiential training in a medically-underserved community, leave the textbox blank under Column 32 (Block 18a).



Warning: For Faculty, select "N/A" in the drop-down menu under Block 18.

IND-GEN - Entering Training Information in a Rural Area



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Tues of Testalan		Training in a l	Rural Area
Type of Training Program	Trainee Unique ID	Select Whether Individual Received Training	Enter # of Contact Hours
(1)	(2) Block 1	(33) Block 19	(34) Block 19a
		Select one Yes No N/A	

Figure 44. IND-GEN - Entering Training Information in a Rural Area

Training in a Rural Area: Select Whether Individual Received Training: Select whether each student received clinical or experiential training in a rural area during the annual reporting period by clicking on the drop-down menu in Column 33 (Block 19) and choosing one of the following options:

- Yes
- No
- N/A

Training in a Rural Area: Enter # of Contact Hours:

- If the student did receive clinical or experiential training in a rural area, enter the total number of hours spent in this type of setting during the annual reporting period in the textbox under Column 34 (Block 19a).
- If the student did NOT receive clinical or experiential training in a rural area, leave the textbox blank under Column 34 (Block 19a).



Warning: For Faculty, select "N/A" in the drop-down menu under Block 19.

IND-GEN — Selecting Student Services Information



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Student Services	
Select Social Support services used by Trainee	Select Academic Support services used by Trainee
34a)	(34b)

Figure 45. IND-GEN — Selecting Student Services Information

Student Services: Select Academic Support services used by Trainee: Select whether each trainee used academic support services by clicking on the drop-down menu under Column 34b and choosing all that apply from the following options:

- Academic coaching
- Faculty or staff led advising sessions
- Individual tutoring
- Study skills training
- None of the above

- Academic support program
- Group tutoring
- Other academic support service
- Time management training
- N/A

Student Services: Select Social Support services used by Trainee: Select whether each trainee used social support services by clicking on the drop-down menu under Column 34a and choosing all that apply from the following options:

- Faculty or staff led counseling sessions
- Peer support advisors
- Service learning opportunities

- Other social support services
- Peer support groups
- None of the above

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• N/A

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IND-GEN - Selecting Whether Individual Left the Program Before Completion

Select Whether Individual Left the Program Before Completion	Select Whether Individual Graduated/Completed the Program	Select Individual's Post-Graduation/Completion Intentions
(36)	(37)	(39)
Block 21	Block 22	Block 22b
Select one		
Yes		

Figure 46. IND-GEN - Selecting Whether Individual Left the Program Before Completion

Select Whether Individual Left the Program Before Completion: Select whether each individual permanently left their training program before completion during the annual reporting period by clicking on the drop-down menu in Column 36 (Block 21) and choosing one of the following options:

- Yes
- No

IND-GEN — Selecting Reason for Attrition or Inactive Status

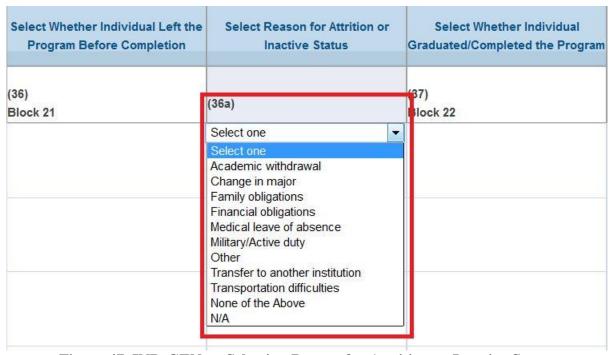


Figure 47. IND-GEN — Selecting Reason for Attrition or Inactive Status

Select Reason for Attrition or Inactive Status: Select the primary reason each individual discontinued participation by clicking on the drop-down menu under Column 36a and choosing one of the following options:

- Academic withdrawal
- Family obligations
- Medical leave of absence
- Other
- Transportation difficulties
- N/A

- Change in major
- Financial obligations
- Military/Active duty
- Transfer to another institution
- None of the Above

IND-GEN - Entering Graduation/Completion Information

Select Whether Individual Graduated/Completed the Program	Select Degree Earned	Select whether individual earned degree on-schedule/on-time	Select whether individual took and passed a certifying examination on the first attempt	
(37) Block 22	(38) Block 22a	(38a)	(38b)	(39) Block 22b

Figure 48. IND-GEN - Entering Graduation/Completion Information

Select Whether Individual Graduated/Completed the Program: Select whether each student completed their training program during the annual reporting period by clicking on the drop-down menu in Column 37 (Block 22) and choosing one of the following options:

- Yes
- No

Select Degree Earned:

- 1. If a individual graduated from their degree program during the reporting period, select the type of degree earned by clicking on the drop-down menu in Column 38 (Block 22a) and choosing one of the options from the list below.
- 2. If the individual did not graduate, select "N/A" under Block 22a.
- AA
- Bachelor's Degree not otherwise specified
- BSW
- DDS/MPH
- DNAP
- DO
- DO/MSPH

- AS
- BPH
- DC
- DDS/MSPH
- DNP
- DO/DrPH
- DO/ScD

- BA
- BS
- DDS
- DMD
- DNSc
- DO/MPH
- DPT

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- DrPH
- MA
- MD/DrPH
- MD/PhD
- MHA
- MMS/MPH
- MPAS
- MPAS/MSPH
- MS
- MSOT
- MSW
- PhD
- ScD

- DVM
- Master's Degree Not Otherwise Specified
- MD/MPH
- MD/ScD
- MMS
- MMS/MSPH
- MPAS/DrPH
- MPAS/ScD
- MS-CTS
- MSPH
- Other
- Post-Masters Certificate
- VMD

- Annual Performance Report Academic Year 2015-2016
 - EdD
 - MD
 - MD/MSPH
 - MEd
 - MMS/DrPH
 - MMS/ScD
 - MPAS/MPH
 - MPH
 - MSCR
 - MSSW
 - PharmD
 - PsyD
 - N/A

Select whether individual earned degree on-schedule/ on-time:

Select whether each individual earned their degree on-schedule/on-time by clicking on the drop-down menu under Column 38a and choosing one of the options below.

(Note- For **Associates Degree** programs, on-schedule/on-time completion is defined as **3** years or less)

(Note- For Bachelor's Degree programs, on-schedule/on-time completion is defined as 6 years or less)

(Note- For **Health Professions** programs, on-schedule/on-time completion is defined as **5** years or less)

(Note- For single or dual track **Doctoral** programs, on-schedule/on-time completion is defined as **7-10** years or less)

- No
- Yes
- N/A

Select whether individual took and passed a certifying examination on the first attempt: Select whether each individual took and passed a certifying examination of the first attempt by clicking on the drop-down menu under Column 38b and choosing one of the following options:

- No
- Yes
- N/A

Select Individual's Post-Graduation/Completion Intentions:

- 1. If a student **did complete** their training program during the annual reporting period, **select "Yes"** in Column 37 (Block 22) and **select the student's training or employment intentions** at the time of completion by clicking on the drop-down menu in Column 39 (Block 22b) and choosing **all that apply** from the following options:
- 2. If a student **did not complete** their training program during the annual reporting period **select "No"** in Column 37 (Block 22) and **select "N/A"** in Column 39 (Block 22b).
- Individual intends to apply to a health professions training program within the next 12 months
- Individual intends to become employed or pursue further training in a primary care setting
- Individual intends to remain enrolled in their health professions training program
- Not Reported

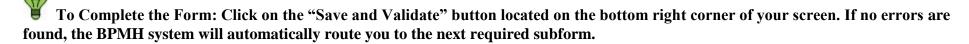
- Individual intends to become employed or pursue further training in a medically underserved community
- Individual intends to become employed or pursue further training in a rural setting
- None of the above
- N/A



Warning: For Faculty, select "N/A" in the drop-down menu under Block 22b.



Warning: "None of the above", "Not reported", and "N/A" cannot be selected in combination with any other option.



INDGEN-PY: Individual Prior Year

INDGEN-PY - Entering Employment Data 1-year Post Graduation/Completion

	Unique	Training or	Select Individual's Enrollment / Employment Status	Individual's	Select Individual's Age	Select Individual's Ethnicity	Select Individual's Race	Whether Individual is from a Rural	from a Disadvantaged Background	Select Individual's Post-Graduation/Completion Intentions	Select whether status/employment data are available for the individual 1-year post graduation/completion	Status	Select Whether Your Organization Hired this Individual
(1)	(2) Block 1	(3) Block 2	(4) Block 3	(5) Block 4	(6) Block 5	(7) Block 6	(8) Block 7	(9) Block 8	(10) Block 9	(12) Block 22b	(13) Block 23	(14) Block 23a	(16)

Figure 49. INDGEN-PY - Entering Employment Data 1-year Post Graduation/Completion

Select whether status/employment data are available for the individual 1-year post graduation/completion: Select whether current training/employment data are available for each student who received a BHW-funded financial award and completed their training program one year prior to this report by clicking on the drop-down menu in Column 13 (Block 23) and choosing one of the following options:

- Yes
- No

Select Individual's Current Training/Employment Status: If current training/employment data are available, select "Yes" in Column 13 (Block 23) and select the student's current training/employment status by clicking on the drop-down menu in Column 14 (Block 23a) and choosing all that apply from the following options:

If current training/employment data are not available, select "No" in Column 13 (Block 23) and select "N/A" in Column 14 (Block 23a).

- Individual applied and was accepted in a health professions training program
- Individual applied to a health professions training program but has not received acceptance
- Individual is currently employed or is pursuing further training in a primary care setting
- Individual applied and was not accepted in a health professions training program
- Individual is currently employed or is pursuing further training in a medically underserved community
- Individual is currently employed or is pursuing further training in a rural setting

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- Individual remained actively enrolled in their health professions training program
- None of the above

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- Individual withdrew from their health professions training program
- N/A

Select Whether Your Organization Hired this Individual: Select whether your organization hired this individual following training program completion by clicking on the drop-down menu under Column 16 and choosing one of the following options:

- No
- Yes
- N/A



Warning: "None of the above" and "N/A" cannot be selected in combination with any other option

T

Note: One-year post-completion employment data are not required for faculty.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Experiential Characteristics—EXP Subforms

EXP - Introduction

- **1. Purpose:** The EXP subforms are used to characterize experiential or clinical training characteristics, including training sites and the number and profession/discipline of trainees.
 - The EXP-1 Setup form captures information about the sites used by grantees to provide trainees with clinical or experiential training
 - The EXP-2 subform collects additional information about each site that was entered in the EXP-1 Setup form.
 - The EXP-3 subform collects information about the profession and discipline of individuals trained at each site that was entered in the EXP-1 Setup form.

2. Order of Subforms:

- EXP subforms MUST be completed in order, otherwise drop-down menus will not prepopulate correctly.
- You must complete and 'Save and Validate' EXP-1 first before proceeding to EXP-2.
- Likewise, you must complete and then 'Save and Validate' EXP-2 before proceeding to EXP-3.

3. Pre-population of Prior Records (training sites) reported previously:

- The BPMH system will prepopulate the names each site previously reported in the Saved Records Table within the EXP-1 subform.
- You must indicate whether each previously-reported site was used during the current annual reporting period.
 - o **If "Yes" was selected**, the BPMH system will prepopulate certain blocks in the EXP-2 subform and display it as an option in the EXP-3 subform.
 - If "'No" was selected, the BPMH system will not include the site as an option in the EXP-2 and EXP-3 subforms.

EXP-1: Training Site Setup

EXP-1 - Entering Site Name

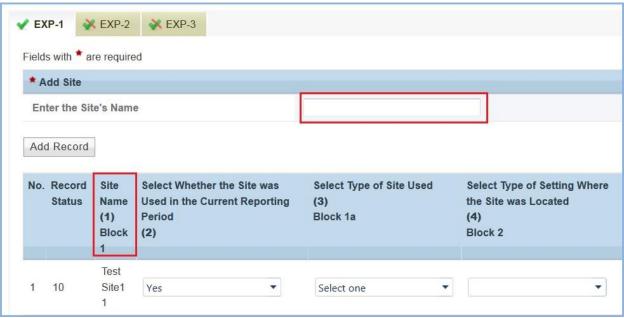


Figure 50. EXP-1 - Entering Site Name

Site Name:

- Enter the name of the site used to train students or fellows during the current annual reporting period in the textbox next to the row labeled, "Enter the Site's Name."
- Next, click the "Add Record" button.
- Repeat this process as necessary to capture the names of each NEW site used during the current annual reporting period.

EXP-1 - Selecting Whether the Site was Used in the Current Period

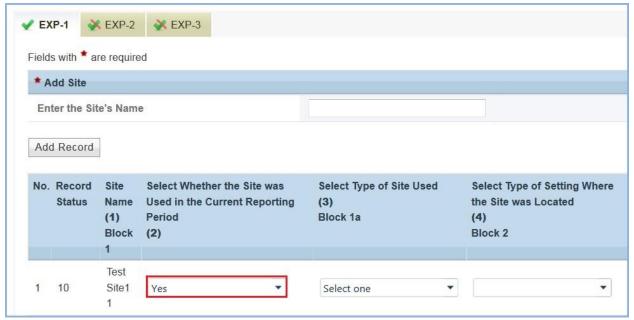


Figure 51. EXP-1 - Selecting Whether the Site was Used in the Current Period

Select Whether the Site was Used in the Current Reporting Period: Select whether each site was used during the current annual reporting period by clicking on the drop-down menu located in Column 2 and choosing one of the following options:

- Yes
- No



Warning: For NEW sites, you must select "Yes" in Column 2.



Note: If "No" is selected in Column 2, then the training site will not populate in the dropdown menus on the EXP-2 and EXP-3 subforms.

EXP-1 - Selecting Type of Site Used

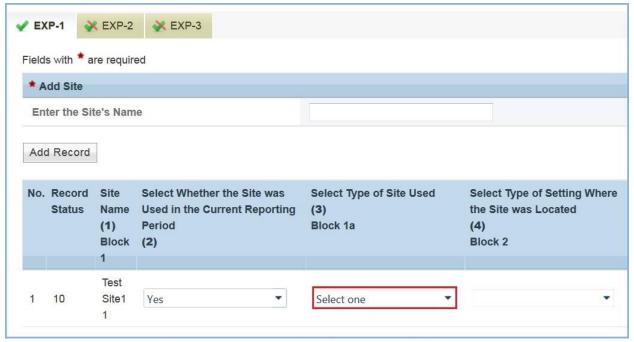


Figure 52. EXP-1 - Selecting Type of Site Used

Select Type of Site Used: Select the type of sites used to train students during the annual reporting period by clicking on the drop-down menu under Block 1a and choosing from one of the following options.

- Academic institution
- Aerospace operations setting
- Community based care programs for elderly mentally challenged individuals
- Community care programs for elderly mentally challenged individuals
- Critical Access Hospital
- Dentist Office
- Federal and State Bureau of Prisons
- Federal Government Office or Agency

- Acute Care for the Elderly (ACE)
 Units
- Ambulatory practice sites
- Community based organization
- Community Health Center (CHC)
- Day and home care programs (e.g., Home Health)
- Emergency Room
- Federal Government Department of Defense / Military

- Acute care services
- Assisted Living Community
- Community Behavioral Health Center
- Community Mental Health Center
- Dental Services
- Extended care facilities
- Federal Government Other
- Geriatric ambulatory care and

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- Geriatric Behavioral or Mental Health Units
- Hospital
- International nonprofit/nongovernmental organization
- Long term Care Facility
- National health association or affiliate
- Other
- Physician Office
- Rural Health Clinic
- Specialty clinics (e.g., mental health practice, rehabilitation, substance abuse clinic)
- Surgery Clinic
- Veterans Affairs Healthcare (e.g., VA Hospital or clinic)

• FQHC or look - alike

- Geriatric consultation services
- Independent Living Facility
- Local Government Office or Agency
- Mobile Clinic/Site
- Nurse Managed Health Clinics
- Other community health center (e.g.; free clinic)
- Program of All Inclusive Care for the Elderly
- School based clinic
- State Government Office or Agency
- Tribal Health Department
- Veterans Affairs Hospital or clinic

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comprehensive units

- Hospice
- Indian Health Service (IHS) site
- Local health department
- National health association
- Nursing Home
- Other Oral Health Facility
- Residential Living Facility
- Senior Centers
- State Health Department
- Tribal Organization

EXP-1 - Selecting Type of Setting Where the Site was Located

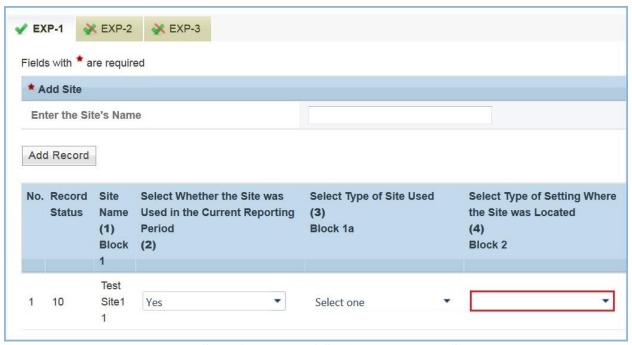


Figure 53. EXP-1 - Selecting Type of Setting Where the Site was Located

Select Type of Setting Where the Site was Located: Select whether each site used to train students during the annual reporting period was located in designated settings by clicking on the drop-down menu under Block 2 and choosing all that apply from the following options.

- Medically underserved community
- Primary Care Setting
- Rural area
- None of the above



Warning: "None of the above" cannot be selected in combination with any other option.

EXP-1 - Entering Site's geographical Data

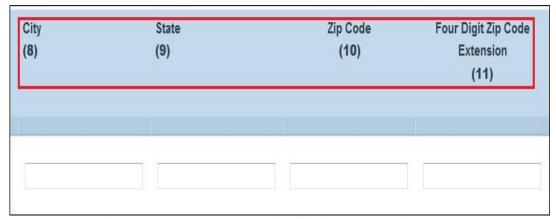


Figure 54. EXP-1 - Entering Site's geographical Data

City: Enter the name of the city where each training site is located by clicking on the textbox under Column 8.

State: Enter the two-letter abbreviation for the state where each training site is located by clicking on the textbox below Column 9.

Zip Code: Enter the zip code (5 digits) where each training site is located by clicking on the textbox under Column 10.

Four Digit Zip Code Extension: Enter the four-digit zip code extension where each training site is located by clicking on the textbox under Column 11.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

EXP-2: Training Site Characteristics

EXP-2 - Selecting Training Program and Site Name



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Danaed Status	Type of Training Program	Site Name	Select Type of Site Used
Record Status	(1)	(2) Block 1	(3) Block 1a

Figure 55. EXP-2 - Selecting Training Program and Site Name

Type of Training Program: Select a training program by clicking on the drop-down menu in Column 1 and choosing one of the available options (programs that were marked on the Training Program Setup Form as "active" in the current reporting period).

Site Name: Pair the selected training program with a site name by clicking on the drop-down menu in Column 2 (Block 1) and choosing one of the available options (sites that were marked in EXP-1 as "used" in the current reporting period).

EXP-2 - Selecting Type of Site Used

Type of Training Program	Site Name	Select Type of Site Used	Select Type of Setting Where the Site was Located
(1)	(2) Block 1	(3) Block 1a	(4) Block 2
Major Participating Site/Rotation Site Medical Specialties (Primary Care) - Pediatrics (General Pediatrics)	University Pediatric Hospital	Academic institution	None of the above

Figure 56. EXP-2 - Selecting Type of Site Used

Select Type of Site Used: Following the selection of a training site in EXP-1, the associated type of site will be automatically populated when the save and validate button is selected.

Warning: Site types are linked to the name of training sites in EXP-1. To change the associated site type with a particular site name, return to EXP-1.

EXP-2 - Selecting Type of Setting Where the Site was Located

Site Name	Select Type of Site Used	Select Type of Setting Where the Site was Located	Select Type(s) of Partners/Consortia used to Offer Training at this Site
(2) Block 1	(3) Block 1a	(4) Block 2	(5) Block 5
University Pediatric Hospital	Academic institution	None of the above	Academic department - outside the institution, Academic department - within the institution, Ambulatory practice sites, Health department - Local, Hospital, Professional Associations, Quality improvement organization

Figure 57. EXP-2 - Selecting Type of Setting Where the Site was Located

Select Type of Setting Where the Site was Located: Following the selection of a training site in EXP-1, the associated settings will be automatically populated when the save and validate button is selected.

Warning: Site settings are linked to the name of training sites in EXP-1. To change the associated site settings with a particular site name, return to EXP-1.

Note: This Block will prepopulate for prior records with data submitted in previous reporting periods.

Reference: To determine whether a site is located in a medically underserved community, please visit HRSA's Office of Shortage Designation at http://datawarehouse.hrsa.gov/GeoAdvisor/ShortageDesignationAdvisor.aspx

Reference: To determine whether a site is located in a rural area, please visit HRSA's Office of Rural Health Policy at http://datawarehouse.hrsa.gov/RuralAdvisor/ruralhealthadvisor.aspx

EXP-2 - Selecting Type(s) of Partners/Consortia

Select Type of Setting Where the Site was Located	Select Type(s) of Partners/Consortia used to Offer Training at this Site	Select Type(s) of Vulnerable Population Served at this Site
(4)	(5)	(7)
Block 2	Block 5	Block 4
	*	

Figure 58. EXP-2 - Selecting Type(s) of Partners/Consortia

Select Type(s) of Partners/Consortia used to Offer Training at this Site: Select the type(s) of partnerships or consortia used or established for the purpose of training students at each site during the current reporting period by clicking on the drop-down menu in Column 5 (Block 5) and choosing all that apply from the following options:

- Academic department outside the institution
- Alzheimer's Association/Chapters
- Area Agencies on Aging
- Educational institution (Grades K 12)
- Federal Government Other HRSA Program
- Federal Government FDA
- Federal Government Other
- Federally qualified health center or look alikes
- Geriatric consultation services
- Health department State
- Hospice
- Long-term care facility
- Nurse managed health clinic
- Physical therapy/Rehabilitation center

- Academic department within the institution
- Alzheimer's Disease Resource Centers
- Community Health Center (CHC)
- Federal Government Veterans Affairs
- Federal Government AHRQ
- Federal Government IHS
- Federal Government Other HHS Agency/Office
- Geriatric ambulatory care and comprehensive units
- Health center (e.g.; free clinic)
- Health department Tribal
- Hospital
- No partners/consortia used
- Nursing home

- Acute Care for the Elderly (ACE) Units
- Ambulatory practice sites
- Day and home care programs (i.e. Home Health)
- Federal Government Department of Defense/Military
- Federal Government CDC
- Federal Government NIH
- Federal Government SAMHSA
- Geriatric Behavioral or Mental Health Units
- Health department Local
- Health insurance/Healthcare Provider Group (e.g.; PPO/HMO)
- Local Government
- Nonprofit organization
- Other
- Professional Associations

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- Quality improvement organization
- Tribal Government

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- State Governmental Programs
- Private/For profit organization
- Senior Center
- Tribal Organization



Warning: You may not select "No partners/consortia used" in combination with any other option.

EXP-2 - Selecting Type(s) of Vulnerable Population

Select Type(s) of Vulnerable Population Served at this Site	City	State	Zip Code	Four Digit Zip Code Extension
(7) Block 4	(8)	(9)	(10)	(11)
•				
College students				
Health Insurance Marketplace				

Figure 59. EXP-2 - Selecting Type(s) of Vulnerable Population

Select Type(s) of Vulnerable Population Served at this Site: Select the type(s) of vulnerable populations served at each site used to train students during the current reporting period by clicking on the drop-down menu in Column 7 (Block 4) and choosing all that apply from the following options:

- Adolescents
- College students
- Individuals with mental illness or substance use disorders
- Migrant workers
- People with disabilities
- Returning war veterans (Iraq or Afghanistan)
- Unemployed
- Victims of abuse or trauma

- Children
- Homeless individuals
- Lesbian/Gay/Bisexual/Transgender
- Military and/or military families
- Pregnant women and infants
- Tribal Population
- Uninsured/Underinsured persons/families
- None of the above

- Chronically ill
- Individuals with HIV/AIDS
- Low income persons/families
- Older adults
- Refugee Adults
- Undocumented Immigrants
- Veterans



Warning: You may not select "None of the above" in combination with any other option.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

EXP-3: Experiential Characteristics - Trainees by Profession/Discipline

EXP-3 - Selecting Training Program and Site Name

Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained
(1)	(2) Block 1	(3) Block 3

Figure 60. EXP-3 - Selecting Training Program and Site Name

Type of Training Program: Select a training program by clicking on the drop-down menu in Column 1 and choosing one of the available practicum/field placement program options (marked on the Training Program Setup Form as "active" in the current annual reporting period).

Site Name: Pair the selected training program with a site name by clicking on the drop-down menu in Column 2 (Block 1) and choosing one of the available options (sites that were marked in EXP-1 as "used" in the current annual reporting period).

EXP-3 - Selecting Profession and Discipline of Individuals Trained

Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained
(1)	(2) Block 1	(3) Block 3

Figure 61. EXP-3 - Selecting Profession and Discipline of Individuals Trained

Select Profession and Discipline of Individuals Trained:

- 1. Select the profession(s) and discipline(s) of students trained for each training program/site during the current reporting period (both "Principal" trainees and "Other Interprofessional" trainees who participated in team-based care with the principal trainees) by clicking on the drop-down menu in Column 3 (Block 3) and choosing one of the options below.
- 2. Repeat as necessary to identify each profession/discipline of all individuals trained at each program/site.
- Behavioral Health Clinical Psychology
- Behavioral Health Marriage and Family Therapy
- Behavioral Health Pastoral/Spiritual Care
- Dentistry Dental Hygiene
- Dentistry Oral Surgery Dentistry
- Dentistry Pathology Dentistry
- Dentistry Prosthodontic Dentistry
- Home Health Aide
- Medicine Anesthesiology
- Medicine Emergency Medicine
- Medicine Geriatric Psychiatry
- Medicine Internal Medicine
- Medicine Medical Genetics

- Behavioral Health Clinical Social Work
- Behavioral Health Other Psychology, Social Work, or Substance Abuse/Addictions Counseling
- Behavioral Health Psychology
- Dentistry Endodontic Dentistry
- Dentistry Orthodontic Dentistry
- Dentistry Pediatric Dentistry
- Dentistry Public Health Dentistry
- Medicine Aerospace Medicine
- Medicine Colon and Rectal Surgery
- Medicine Family Medicine
- Medicine Geriatrics
- Medicine Internal Medicine/Family Medicine
- Medicine Neurological Surgery

- Behavioral Health Counseling Psychology
- Behavioral Health Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry Dental Assistant
- Dentistry General Dentistry
- Dentistry Other
- Dentistry Periodontic Dentistry
- Dentistry Radiology Dentistry
- Medicine Allergy and Immunology
- Medicine Dermatology
- Medicine General Preventive Medicine
- Medicine Integrative Medicine

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- Medicine Nuclear Medicine
- Medicine Ophthalmology
- Medicine Otolaryngology
- Medicine Physical Medicine and Rehabilitation
- Medicine Preventive Medicine
- Medicine Preventive Medicine/Internal Medicine
- Medicine Preventive Medicine/Public Health
- Medicine Radiology Diagnostic
- Medicine Thoracic Surgery Integrated
- Nursing Alternative/Complementary Nursing
- Nursing CNS Family
- Nursing CNS Pediatrics
- Nursing CNS Women's health and pediatrics
- Nursing Licensed practical/vocational nurse (LPN/LVN)
- Nursing NP Adult
- Nursing NP Child/Adolescent Psychiatric/Mental Health
- Nursing NP Family Psychiatric/Mental Health
- Nursing NP Pediatrics
- Nursing Nurse anesthetist
- Nursing Nurse midwife
- Nursing Registered Nurse
- Other Audiology
- Other Direct Service Worker
- Other Health Education Specialist
- Other Medical Assistant

- Medicine Obstetrics and Gynecology
- Medicine Orthopaedic Surgery
- Medicine Pathology Anatomical and Clinical
- Medicine Plastic Surgery
- Medicine Preventive Medicine/Aerospace Medicine
- Medicine Preventive Medicine/Occupational Medicine
- Medicine Psychiatry
- Medicine Surgery General
- Medicine Urology
- Nursing CNL Generalist
- Nursing CNS Geropsychiatric
- Nursing CNS Psychiatric/Mental health
- Nursing Community health nursing
- Nursing NP Acute care adult gerontology
- Nursing NP Adult gerontology
- Nursing NP Emergency care
- Nursing NP Geropsychiatric
- Nursing NP Women's health
- Nursing Nurse educator
- Nursing Other (e.g., CNA, PCA)
- Nursing Researcher/Scientist
- Other Chiropractor
- Other Facility Administrator
- Other Health Informatics/Health Information Technology
- Other Medical Laboratory Technology
- Other Nutritionist
- Other Optometry
- Other Physical Therapy
- Other Radiologic technology
- Other Research

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- Medicine Internal Medicine/Pediatrics
- Medicine Neurology
- Medicine Occupational Medicine
- Medicine Other
- Medicine Pediatrics
- Medicine Plastic Surgery Integrated
- Medicine Preventive Medicine/Family Medicine
- Medicine Preventive Medicine/Pediatrics
- Medicine Radiation Oncology
- Medicine Thoracic Surgery
- Medicine Vascular Surgery Integrated
- Nursing CNS Adult gerontology
- Nursing CNS Neonatal
- Nursing CNS Women's health
- Nursing Home Health Aide
- Nursing NP Acute care pediatric
- Nursing NP Adult Psychiatric/Mental health
- Nursing NP Family
- Nursing NP Neonatal
- Nursing Nurse administrator
- Nursing Nurse informaticist
- Nursing Public health nurse
- Other Allied Health
- Other Community Health Worker
- Other First Responder/EMT
- Other Lay and Family Caregiver
- Other Midwife
- Other Occupational Therapy

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- Other Midwife (non-nurse)
- Other Office/Support Staff
- Other Pharmacy
- Other Profession Not Listed
- Other Registered Dietician
- Other Speech Pathology
- Other Veterinary Medicine
- Public Health Disease Prevention & Health Promotion
- Public Health Health Administration
- Public Health Injury Control & Prevention
- Student Nursing Licensed Practical/Vocational Nurse (LPN/LVN)
- Student 9 12 (secondary)
- Student Chiropractic School
- Student CNS Family
- Student CNS Pediatrics
- Student CNS Women's health and pediatrics
- Student Dental Hygiene
- Student Diploma/Certificate
- Student Graduate Behavioral Health
- Student Graduate Nursing Doctorate
- Student Graduate Other Behavioral Health
- Student Graduate Radiological Assistant
- Student Home Health Aide
- Student Licensed Practical/Vocational Nurse

- Other Speech Therapy
- Physician Assistant
- Public Health Environmental Health
- Public Health Health Policy & Management
- Public Health Nutrition
- Student Nursing Nurse midwife
- Student Alternative/Complementary Nursing
- Student CNL Generalist
- Student CNS Geropsychiatric
- Student CNS Psychiatric/Mental health
- Student Community Health Nursing
- Student Dental School
- Student EMT
- Student Graduate Clinical Laboratory Services
- Student Graduate Nursing Masters
- Student Graduate Psychology
- Student Graduate Social Work
- Student K 8 (primary)
- Student Medical Assistant
- Student Midwife (non nurse)
- Student NP Adult
- Student NP Child/Adolescent Psychiatric/Mental Health
- Student NP Family Psychiatric/Mental Health
- Student NP Other advanced nurse specialists
- Student NP Women's health
- Student Nurse Educator
- Student Nursing Assistant
- Student Occupational Therapy
- Student Pharmacy School
- Student Podiatry School

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- Other Other
- Other Podiatry
- Other Recreational Therapy
- Other Respiratory Therapy
- Other Unknown
- Public Health Biostatistics
- Public Health Epidemiology
- Public Health Infectious Disease Control
- Public Health Social & Behavioral Sciences
- Student Nursing Registered nurse (RN)
- Student Certified Nursing Assistant
- Student CNS Adult gerontology
- Student CNS Neonatal
- Student CNS Women's health
- Student Dental Assistant
- Student Dietician
- Student Graduate Allied Health
- Student Graduate Nursing
- Student Graduate Other
- Student Graduate Public Health
- Student Health Informatics
- Student Law School
- Student Medical School
- Student NP Acute care adult gerontology
- Student NP Adult gerontology
- Student NP Emergency care
- Student NP Geropsychiatric
- Student NP Pediatrics
- Student Nurse Administrator

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(LPN/LVN)

- Student Midwife
- Student NP Acute care pediatric
- Student NP Adult Psychiatric/Mental health
- Student NP Family
- Student NP Neonatal
- Student NP Psychiatric/Mental health
- Student Nurse Anesthetist
- Student Nurse Researchers/Scientists
- Student Nursing Pre-licensure
- Student Pharmacy
- Student Physician Assistant
- Student Public Health Nurse
- Student Rehabilitation Therapy
- Student Undergraduate Clinical Laboratory Services
- Student Undergraduate Radiological Assistant

- Student Registered nurse (RN)
- Student Speech Therapy
- Student Undergraduate Other
- Student Undergraduate Radiological Technician

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- Student Nurse Midwife
- Student Nursing Informatics
- Student Optometry
- Student Physical Therapy
- Student Post high school / Pre college
- Student Registered Nurse BSN
- Student Undergraduate Allied Health
- Student Undergraduate Public Health

EXP-3 - Entering # Trained in the Profession and Discipline

Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline
(1)	(2)	(3)	(4)
	Block 1	Block 3	Block 3

Figure 62. EXP-3 - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline: Enter the number of students in the profession and discipline selected in the previous step who were trained at each site during the annual reporting period in the textbox under Column 4 (Block 3).

Note: Counts provided in the textbox under Block 3 should be based on individuals reported on the LR/DV tables.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

EXP-3 - Entering # of Other Interprofessional trainees who participated in team-based care

Type of Training Program	Site Name	Select Profession and Discipline of Individuals Trained	Enter # Trained in this Profession and Discipline	Enter # of Other Trainees in this Profession and Discipline Who Participated in Interprofessional Team-based care
(1)	(2)	(3)	(4)	(5)
	Block 1	Block 3	Block 3	Block 8

Figure 63. EXP-3 - Entering # of Other Interprofessional trainees who participated in team-based care

Enter # of Other Trainees in this Profession and Discipline Who Participated in Interprofessional Team-based care: In Column 5 (Block 8), enter the number of all OTHER Interprofessional trainees who participated in team-based care alongside the Principal trainee. Counts provided should be based on individuals NOT reported on PC-7 from non-HRSA-funded programs.



Warning: Do not count faculty or non-trainees.

Course Development and Enhancement—CDE Subforms

CDE - Introduction

- For courses or other training activities that were reported previously and marked as "Under Development" or "Developed, but Not Yet Implemented": The BPMH system will prepopulate certain Blocks in the CDE-1 subform. Please note that all other Blocks must be updated on a annual basis until the course or training activity is marked as "Implemented."
- For courses or other training activities that were reported previously and marked as "Implemented": The BPMH system will transfer these records to the CDE-1a subform. The only action required in this subform is to select whether the course or training activity previously implemented was also offered during the annual reporting period.

Warning: Both CDE-1 and CDE-1a must be completed and validated prior to beginning CDE-2. If you reach the CDE-2 form, and no drop-down selections appear, you have not validated both CDE-1 and CDE-1a subforms.

CDE-1: Course Development and Enhancement - Course Information CDE-1 - Setup

To provide data about courses and other training activities that have been developed or enhanced through the grant **or to provide updates about previously reported activities** (those that have not yet been implemented), click "Yes" to the initial setup question. Clicking "Yes" will activate the embedded Excel® form that will allow you to begin data entry.



Figure 64. CDE-1 - Setup

Warning: If you have used the CDE form before, this answer is pre-selected 'Yes' for you. You do not need to answer this question again. Please move ahead to the CDE form by using the form list located on the left side of your screen.

CDE-1 - Entering the Name of Course/Training Activity



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.



Figure 65. CDE-1 - Entering the Name of Course/Training Activity

Name of Course or Training Activity:

- Enter the name of each NEW course or training activity that was developed or enhanced through the grant at any point during the current annual reporting period.
- Click the "Add Record" button to save your entry.
- Repeat this process to separately create each NEW course or training activity that was developed or enhanced through the grant.

Warning: Complete the CDE-1 Setup form only if grant funds were used to develop or enhance NEW courses or training activities other than those previously reported.

CDE-1 - Selecting Type of Course or Training Activity



Figure 66. CDE-1 - Selecting Type of Course or Training Activity

Select Type of Course or Training Activity: Select the type of course or training activity that was developed or enhanced through the grant by clicking on the drop-down menu in Column 2 (Block 2) and choosing one of the following options:

- Academic course
- Continuing Education courses
- Field placement/practicum
- Training/Workshop for health professions students, fellows or residents
- Clinical rotation
- Faculty development programs or activities
- Grand rounds

CDE-1 - Selecting whether Course was Newly Developed or Enhanced



Figure 67. CDE-1 - Selecting whether Course was Newly Developed or Enhanced

Select whether Course or Training Activity was Newly Developed or Enhanced: Select whether each course or training activity identified in Column 1 (Block 1) was newly developed or enhanced by clicking on the drop-down menu in Column 3 (Block 3) and choosing one of the following options:

- Enhanced
- Newly developed

Note: Select 'Newly Developed' for courses or training activities that were not in existence and were developed in their entirety through the grant.

Note: Select 'Enhanced' for courses or training activities that were in existence prior to the grant and were modified or restructured through the grant.

CDE-1 - Entering Development/Enhancement Status



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.



Figure 68. CDE-1 - Entering Development/Enhancement Status

Select Status of Development or Enhancements: Select each course or training activity's current status by clicking on the drop-down menu in Column 4 (Block 4) and choosing one of the following options:

- Developed, not yet implemented
- Implemented
- Under development

For Courses or Training Activities Implemented, Enter Academic Year of First Implementation: From Year:

- 1. For courses and training activities under development leave the textboxes in Columns 5 and 6 (Block 4a) blank.
- 2. For courses and training activities that were developed but not yet implemented, leave the textboxes in Columns 5 and 6 (Block 4a) blank.
- 3. For developed or enhanced courses and training activities that were implemented, enter the first academic year that each developed/enhanced course or training activity was implemented in Columns 5 and 6 (Block 4a) using the YYYY-YYYY format.

For Courses or Training Activities Implemented, Enter Academic Year of First Implementation: To Year:

- 1. For courses and training activities under development leave the textboxes in Columns 5 and 6 (Block 4a) blank.
- 2. For courses and training activities that were developed but not yet implemented, leave the textboxes in Columns 5 and 6 (Block 4a) blank.
- 3. For developed or enhanced courses and training activities that were implemented, enter the first academic year that each developed/enhanced course or training activity was implemented in Columns 5 and 6 (Block 4a) using the YYYY-YYYY format.



Note: For courses and training activities under development leave the textboxes in Columns 5 and 6 (Block 4a) blank.



Note: For courses and training activities that were developed but not yet implemented, leave the textboxes in Columns 5 and 6 (Block 4a) blank.

CDE-1 - Entering Curriculum



Figure 69. CDE-1 - Entering Curriculum

Enter the Curriculum the Course or Training Activity is Associated With: Type the name of the curriculum associated with each course or training activity that was developed or enhanced through the grant in the textbox in Column 7 (Block 5).



Note: If the course or training activity that was developed or enhanced is not associated with a specific curriculum, type "N/A".

CDE-1 - Selecting Delivery Mode

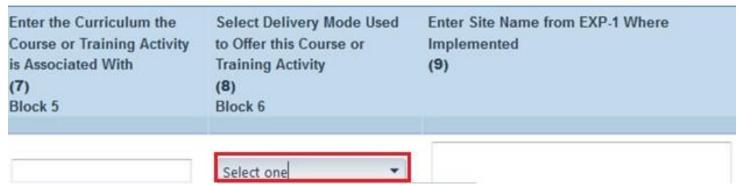


Figure 70. CDE-1 - Selecting Delivery Mode

Select Delivery Mode Used to Offer this Course or Training Activity: Select the primary mode used to deliver each course or training activity that was developed or enhanced through the grant by clicking on the drop-down menu in Column 8 (Block 6) and choosing one of the following options:

- Classroom-based
- Clinical Rotation
- Distance learning (Online, Webinar)
- Experiential/Field-based
- Hybrid

CDE-1 - Selecting EXP-1 Site Name Where Implemented



Figure 71. CDE-1 - Selecting EXP-1 Site Name Where Implemented

Enter Site Name from EXP-1 Where Implemented: Use the drop-down menu of EXP-1 sites in Column 9 to select all of the names of sites where the course or activity took place for courses/activities marked in Column 2 (Block 2).



Warning: You may not select "N/A" in combination with any other option.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform..

CDE-1a: Course Development and Enhancement - Log of Courses/Training Activities Implemented

CDE-1a - Selecting Whether the Course was Offered in the Current Period

Name of Course or Training Activity	Select Type of Course or Training Activity	Select whether Course or Training Activity was Newly	Select Status of Development or		For Courses or Training Activities Implemented, Enter Academic Year of First Implementation		Select Delivery Mode Used to Offer this Course or	Select Whether the Course or Training Activity was
(1) Block 1	(2) Block 2	Developed or Enhanced (3) Block 3	Enhancements (4) Block 4	From Year (5) Block 4a	To Year (6) Block 4a	is Associated With (7) Block 5	Training Activity (8) Block 6	Offered in the Current Reporting Period (9)
Medical Orders for Life-Sustaining Treatment	Faculty development progi™	Enhanced ▼	Implemented	2011	2012	Establishing a Center of Exc	Classroom-based 🔻	Select one ▼

Figure 72. CDE-1a - Selecting Whether the Course was Offered in the Current Period

Select Whether the Course or Training Activity was Offered in the Current Reporting Period: Select whether each previously-implemented course or training activity was also offered during the current reporting period by clicking on the drop-down menu in Column 9 and choosing one of the following options:

- Yes
- No

Warning: If "No" is selected for Column 9 in the CDE-1a subform, the name of that course or training activity will not display as an option in the CDE-2 subform.

CDE-1a - Selecting EXP-1 Site Name Where Implemented

Name of Course or Training Activity	Select Type of Course or Training Activity	Select whether Course or Training Activity was Newly	Select Status of Development or Enhancements	For Courses or Training a			Select Delivery Mode Used to Offer this Course or Training	Select Whether the Course or Training Activity was Offered in	Enter Site Name from EXP-1 Where Implemented
(1) Block 1	(2) Block 2	Developed or Enhanced (3) Block 3	(4) Block 4	From Year (5) Block 4a	To Year (6) Block 4a	is Associated With (7) Block 5	Activity (8) Block 6	the Current Reporting Period (9)	(10)
Medical Orders for Life-Sustaining Treatment	Faculty development progre	Enhanced 🔻	Implemented 🔻	2011	2012	Establishing a Center	Classroom-based 🔻	Select one ▼	

Figure 73. CDE-1a - Selecting EXP-1 Site Name Where Implemented

Enter Site Name from EXP-1 Where Implemented: Use the drop-down menu of EXP-1 sites in Column 10 to select all of the names of sites where the course or activity took place for courses/activities marked in Column 2 (Block 2).

Warning: You may not select "N/A" in combination with any other option

Warning: If a previously-implemented course was NOT offered in the current reporting period, leave the textbox under Column 10 blank.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

CDE-2 - Adding Courses and Profession/Disciplines



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

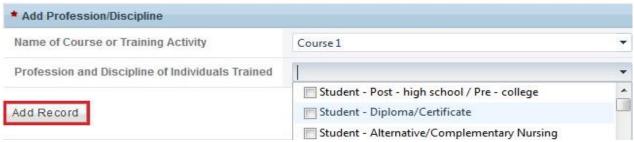


Figure 74. CDE-2 - Adding Courses and Profession/Disciplines

Name of Course or Training Activity: Select the name of one course or training activity by clicking on the drop-down menu next to "Name of Course or Training Activity" and choosing one of the available options. Only the names of courses or workshops for students that were marked as "Implemented" in the CDE-1 subform (for new records) or marked as "Offered" in the CDE-1a subform (for previous records) will appear as options in the drop-down menu.

Profession and Discipline of Individuals Trained:

- Next, select all of the profession(s) and discipline(s) of individuals trained through each course or workshop offered during the annual reporting period by choosing all that apply from the options below
- Click on the "Add Record" button.
- Repeat this process to capture the professions and disciplines of all individuals trained in each course or workshop offered during the current annual reporting period.
- Behavioral Health Clinical Psychology
- Behavioral Health Marriage and Family Therapy
- Behavioral Health -Pastoral/Spiritual Care
- Dentistry Dental Hygiene

- Behavioral Health Clinical Social Work
- Behavioral Health Other Psychology
- Behavioral Health Psychology
- Dentistry Endodontic Dentistry
- Dentistry Orthodontic Dentistry
- Dentistry Pediatric Dentistry

- Behavioral Health Counseling Psychology
- Behavioral Health Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry Dental Assistant
- Dentistry General Dentistry
- Dentistry Other
- Dentistry Periodontic Dentistry

- Dentistry Oral Surgery Dentistry
- Dentistry Pathology Dentistry
- Dentistry Prosthodontic Dentistry
- Medicine Allergy and Immunology
- Medicine Dermatology
- Medicine General Preventive Medicine
- Medicine Integrative Medicine
- Medicine Internal Medicine/Pediatrics
- Medicine Neurology
- Medicine Occupational Medicine
- Medicine Other
- Medicine Physical Medicine and Rehabilitation
- Medicine Preventive Medicine/Aerospace Medicine
- Medicine Preventive Medicine/Occupational Medicine
- Medicine Psychiatry
- Medicine Surgery General
- Medicine Urology
- Nursing CNL Generalist
- Nursing CNS Geropsychiatric
- Nursing CNS Psychiatric/Mental health
- Nursing Community health nursing
- Nursing NP Acute care adult gerontology
- Nursing NP Adult gerontology
- Nursing NP Family Psychiatric/Mental Health

- Dentistry Public Health Dentistry
- Medicine Anesthesiology
- Medicine Emergency Medicine
- Medicine Geriatric Psychiatry
- Medicine Internal Medicine
- Medicine Medical Genetics
- Medicine Nuclear Medicine
- Medicine Ophthalmology
- Medicine Otolaryngology
- Medicine Plastic Surgery
- Medicine Preventive Medicine/Family Medicine
- Medicine Preventive Medicine/Pediatrics
- Medicine Radiation Oncology
- Medicine Thoracic Surgery
- Medicine Vascular Surgery Integrated
- Nursing CNS Adult gerontology
- Nursing CNS Neonatal
- Nursing CNS Women's health
- Nursing Home Health Aide
- Nursing NP Acute care pediatric
- Nursing NP Emergency care
- Nursing NP Geropsychiatric
- Nursing NP Psychiatric/Mental health
- Nursing Nurse Assistant/Patient Care Associate (PCA)
- Nursing Nurse midwife
- Nursing Public health nurse
- Other Chiropractor
- Other Facility Administrator
- Other Health Informatics/Health

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- Dentistry Radiology Dentistry
- Medicine Colon and Rectal Surgery
- Medicine Family Medicine
- Medicine Geriatrics
- Medicine Internal Medicine/Family Medicine
- Medicine Neurological Surgery
- Medicine Obstetrics and Gynecology
- Medicine Orthopaedic Surgery
- Medicine Pathology Anatomical and Clinical
- Medicine Plastic Surgery Integrated
- Medicine Preventive Medicine/Internal Medicine
- Medicine Preventive Medicine/Public Health
- Medicine Radiology Diagnostic
- Medicine Thoracic Surgery Integrated
- Nursing Alternative/Complementary Nursing
- Nursing CNS Family
- Nursing CNS Pediatrics
- Nursing CNS Women's health and pediatrics
- Nursing Licensed practical/vocational nurse (LPN/LVN)
- Nursing NP Adult
- Nursing NP Family
- Nursing NP Neonatal
- Nursing NP Women's health
- Nursing Nurse educator
- Nursing Nurse practitioner
- Nursing Registered Nurse
- Other Community Health Worker
- Other First Responder/EMT
- Other Lay and Family Caregiver
- Other Nutritionist

- Nursing NP Pediatrics
- Nursing Nurse administrator
- Nursing Nurse informaticist
- Nursing Other (e.g., CNA, PCA)
- Nursing Researcher/Scientist
- Other Direct Service Worker
- Other Health Education Specialist
- Other Medical Assistant
- Other Office/Support Staff
- Other Podiatry
- Other Unknown
- Other Occupational Therapy
- Physician Assistant
- Public Health Environmental Health
- Public Health Infectious Disease Control
- Student Certified Nursing Assistant
- Student 9 12 (secondary)
- Student CNS Adult gerontology
- Student CNS Neonatal
- Student CNS Women's health
- Student Dental Assistant
- Student Diploma/Certificate
- Student Graduate Nursing Doctorate
- Student Graduate Other Behavioral Health
- Student Graduate Radiological Assistant
- Student K 8 (primary)
- Student Medical School
- Student NP Acute care pediatric

Information Technology

- Other Midwife (non nurse)
- Other Optometry
- Other Profession Not Listed
- Other Allied Health
- Other Physical Therapy
- Public Health Biostatistics
- Public Health Epidemiology
- Public Health Injury Control & Prevention
- Student Chiropractic School
- Student Alternative/Complementary Nursing
- Student CNS Family
- Student CNS Pediatrics
- Student CNS Women's health and pediatrics
- Student Dental Hygiene
- Student Graduate Allied Health
- Student Graduate Nursing Masters
- Student Graduate Psychology
- Student Graduate Social Work
- Student Licensed Practical/Vocational Nurse (LPN/LVN)
- Student Midwife (non nurse)
- Student NP Adult
- Student NP Child/Adolescent Psychiatric/Mental Health
- Student NP Family Psychiatric/Mental Health
- Student NP Other advanced nurse specialists
- Student NP Women's health

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- Other Pharmacy
- Other Respiratory Therapy
- Other Home Health Aide
- Other Speech Therapy
- Public Health Disease Prevention & Health Promotion
- Public Health Health Policy & Management
- Public Health Social & Behavioral Sciences
- Student Podiatry School
- Student CNL Generalist
- Student CNS Geropsychiatric
- Student CNS Psychiatric/Mental health
- Student Community Health Nursing
- Student Dental School
- Student Graduate Clinical Laboratory Services
- Student Graduate Other
- Student Graduate Public Health
- Student Home Health Aide
- Student Medical Assistant
- Student NP Acute care adult gerontology
- Student NP Adult gerontology
- Student NP Emergency care
- Student NP Geropsychiatric
- Student NP Pediatrics
- Student Nurse Administrator
- Student Nurse Midwife
- Student Occupational Therapy
- Student Physical Therapy
- Student Public Health Nurse
- Student Rehabilitation Therapy
- Student Undergraduate Clinical Laboratory Services
- Student Undergraduate Radiological

- Student NP Adult Psychiatric/Mental health
- Student NP Family
- Student NP Neonatal
- Student NP Psychiatric/Mental health
- Student Nurse Anesthetist
- Student Nurse Researchers/Scientists
- Student Optometry
- Student Physician Assistant
- Student Registered nurse (RN)
- Student Speech Therapy
- Student Undergraduate Other
- Student Undergraduate Radiological Technician

- Student Nurse Educator
- Student Nursing Informatics
- Student Pharmacy School
- Student Post high school / Pre college
- Student Registered Nurse BSN
- Student Undergraduate Allied Health
- Student Undergraduate Public Health
- Student Unknown

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Note: CDE-2 is used to report trainee counts for academic courses, training workshops, grand rounds, clinical rotations, and field placement/practica that were offered during the annual reporting period. Trainee counts for faculty development participants are captured separately with the FD-subforms and continuing education participants are reported with the CE subforms.

CDE-2 - Entering # Trained in the Profession and Discipline



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

No	. Name of Course or Training	Profession and Discipline of Individuals	Enter # Trained in this Profession and
	Activity	Trained	Discipline
	(1)	(2)	(3)
	Block 1	Block 7	Block 7
		Student - NP - Acute care	
1	Course 1	pediatric	

Figure 75. CDE-2 - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline:

- For each developed/enhanced course or training activity offered during the current reporting period, click on the drop-down menu in Column 2 (Block 7) and **choose one profession and discipline** (this menu will load with the professions/disciplines selected in the previous step).
- Next, **enter the number of individuals** trained from that profession and discipline in the Column 3.
- **Repeat this step** as many times as necessary to capture the total number of individuals by profession and discipline who were trained in each course or workshop offered during the annual reporting period.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

Faculty Development, Instruction, and Recruitment—FD Subforms

FD - Introduction

Purpose: The FD-1 subforms collect information about the characteristics and trainees of faculty development programs.

Purpose: The FD-2 subforms collect information about the characteristics and trainees of faculty development activities.

Purpose: The FD-3 subforms collect information about the characteristics of faculty-student collaborative research projects.

FD-1a: Faculty Development - Structured Faculty Development Training Programs FD-1a - Adding Structured Faculty Development Programs



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

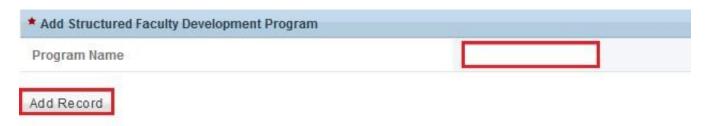


Figure 76. FD-1a - Adding Structured Faculty Development Programs

Program Name:

- 1. Enter the name of each new structured faculty development program coordinated and/or supported through the grant during the current reporting period.
- 2. Select "Add Record".
- 3. Repeat this process as necessary to enter each new structured faculty development program that was coordinated and/or supported through the grant during the current reporting period.

Warning: If a previously completed program (prior record) is being offered again with a new cohort, it will need to be re-created as a new record

FD-1a - Selecting Program Status



Figure 77. FD-1a - Selecting Program Status

Select Program Status in the Current Reporting Period: Select the status of each faculty development program at the end of the annual reporting period by clicking on the drop-down menu under Block 1a and choosing one of the following options:

- Complete
- Ongoing



Note: Select 'Ongoing' if the training program did not conclude by June 30, 2016.



Note: Select 'Complete' if the training program concluded at some point during the annual reporting period (i.e. July 01, 2015 - June 30, 2016)

FD-1a - Entering Program Information for Degree/Non-Degree Programs



Figure 78. FD-1a - Entering Program Information for Degree/Non-Degree Programs

Select Whether this was a Degree Bearing Program: Select whether each faculty development training program that was supported through the grant during the current reporting period culminates in awarding participants with a professional certificate or academic degree by clicking on the drop-down menu and choosing one of the following options:

- Yes
- No

For Degree-bearing Programs: Select Type of Degree Offered:

- 1. If you selected "Yes" in Column 2 (Block 2), select the type of degree that participants will earn when completing each program by clicking on the drop-down menu in Column 3 (Block 2a) and choosing **one** of the options below:
- 2. If you selected "No" in Column 2 (Block 2), select "N/A" in Column 3 (Block 2a).
- AA
- Bachelor's Degree Not Otherwise Specified
- BSN

- AS
- BPH
- BSW

- BA
- BS
- Certificate

- DC
- DDS/MSPH
- DNP
- DO/DrPH
- DO/ScD
- MA
- MD/DrPH
- MD/PhD
- MHA
- MMS/MPH
- MPAS
- MPAS/MSPH
- MS
- MSN
- MSW
- Post-Masters Certificate
- VMD

- DDS
- Diploma
- DNSc
- DO/MPH
- DrPH
- Master's Degree Not Otherwise Specified
- MD/MPH
- MD/ScD
- MMS
- MMS/MSPH
- MPAS/DrPH
- MPAS/ScD
- MS-CTS
- MSPH
- PharmD
- PsvD
- N/A

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- DDS/MPH
- DMD
- DO
- DO/MSPH
- DVM
- MD
- MD/MSPH
- MEd
- MMS/DrPH
- MMS/ScD
- MPAS/MPH
- MPH
- MSCR
- MSSW
- PhD
- ScD

For Degree-bearing Programs: Select Primary Focus Area:

- 1. If you selected "No" in Column 2 (Block 2), select "N/A" in Column 4 (Block 2b).
- 2. If you selected "Yes" in Column 2 (Block 2), select the primary focus area of the degree-bearing structured faculty development program by clicking on the drop-down menu in Column 4 (Block 2b) and choosing one of the options below:
- Dentistry Dental Assistant
- Dentistry Endodontic Dentistry
- Dentistry Oral Surgery Dentistry
- Dentistry Pathology Dentistry
- Dentistry Prosthodontic Dentistry
- Nursing BS/BSN Completion
- Nursing CNS Geropsychiatric
- Nursing CNS Psychiatric/Mental health

- Dentistry Dental Hygiene
- Dentistry General Dentistry
- Dentistry Orthodontic Dentistry
- Dentistry Pediatric Dentistry
- Dentistry Public Health Dentistry
- Nursing CNS Adult gerontology
- Nursing CNS Neonatal
- Nursing CNS Women's health
- Nursing NP Acute care pediatric

- Dentistry Dental Hygiene/Public Health
- Dentistry General Dentistry/Public Health
- Dentistry Other
- Dentistry Periodontic Dentistry
- Dentistry Radiology Dentistry
- Nursing CNS Family
- Nursing CNS Pediatrics
- Nursing Home Health Aide
- Nursing NP Adult

- Nursing NP Acute care adult gerontology
- Nursing NP Adult gerontology
- Nursing NP Emergency care
- Nursing NP Geropsychiatric
- Nursing NP Pediatrics
- Nursing Nurse Anesthetist
- Nursing Nurse Researchers/Scientists
- Nursing Pre-licensure
- Public Health Biostatistics
- Public Health Epidemiology
- Public Health Injury Control & Prevention
- Public Health Social & Behavioral Sciences

- Nursing NP Adult Psychiatric/Mental health
- Nursing NP Family
- Nursing NP Neonatal
- Nursing NP Women's health
- Nursing Nurse Educator
- Nursing Nursing Assistant
- Nursing Public Health Nurse
- Public Health Disease Prevention & Health Promotion
- Public Health Health Policy & Management
- Public Health Maternal and Child Health
- N/A

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- Nursing NP Child/Adolescent Psychiatric/Mental Health
- Nursing NP Family Psychiatric/Mental Health
- Nursing NP Other advanced nurse specialty
- Nursing Nurse Administrator
- Nursing Nurse Midwife
- Nursing Nursing Informatics
- Other Midwife
- Public Health Environmental Health
- Public Health Infectious Disease Control
- Public Health Nutrition

For Non-Degree Bearing Program, Enter Length of Training Program in Clock Hours:

- 1. If you selected "Yes" in Column 2 (Block 2), enter a zero ("0") in Column 5, (Block 3).
- 2. If you selected "No" in Column 2 (Block 2), enter the length of each non-degree bearing structured faculty development program in clock hours in the textbox in Column 5 (Block 3).

FD-1a - Entering % of Time Spent Developing Competencies in Different Roles



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.

Clinician	Administrator	Educator	Researche
(6)	(7)	(8)	(9)
Block 5	Block 5	Block 5	Block 5

Figure 79. FD-1a - Entering % of Time Spent Developing Competencies in Different Roles

Enter the % of Time Spent Developing Competencies for the Following Roles: Clinician: Enter the percentage of time spent in each faculty development program developing competencies associated with Clinician in Column 6(Block 5).

Enter the % of Time Spent Developing Competencies for the Following Roles: Administrator: Enter the percentage of time spent in each faculty development program developing competencies associated with administrator Column 7(Block 5).

Enter the % of Time Spent Developing Competencies for the Following Roles: Educator: Enter the percentage of time spent in each faculty development program developing competencies associated witho Educator Column 8(Block 5).

Enter the % of Time Spent Developing Competencies for the Following Roles: Researcher: Enter the percentage of time spent in each faculty development program developing competencies associated with Researcher Column 9(Block 5).



Note: Percentages of time spent across the faculty four roles must total 100%.

FD-1a - Entering # of Faculty Who Completed the Program

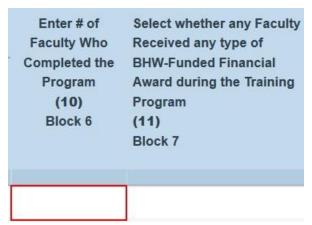


Figure 80. FD-1a - Entering # of Faculty Who Completed the Program

Enter # of Faculty Who Completed the Program:

- If you marked a program as "Complete" in Column 1a, enter the number of faculty who completed each faculty development program during the current annual reporting period in the textbox in Column 10 (Block 6).
- If you selected "Ongoing" in Column 1a, enter a zero ("0") in the textbox in Column 10 (Block 6).

FD-1a - Selecting whether Faculty Received BHW-Funded Financial Award

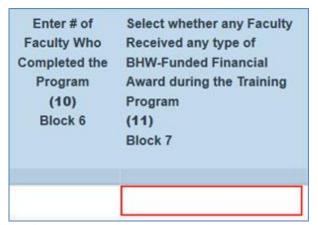


Figure 81. FD-1a - Selecting whether Faculty Received BHW-Funded Financial Award

Select whether any Faculty Received any type of BHW-Funded Financial Award during the Training Program: Select whether any faculty who participated in a training program received any type of BHW-funded financial award during the current reporting period by clicking on the drop-down menu in Column 11 (Block 7) and choosing from the following options:

- Yes
- No

Warning: You must complete an IND-GEN subform for each faculty who received a BHW-funded financial award during the annual reporting period for participating in a structured faculty development program.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

FD-1b: Faculty Development - Faculty Trained By Profession/Discipline

FD-1b - Adding Profession and Discipline for Structured Programs



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.



Figure 82. FD-1b - Adding Profession and Discipline for Structured Programs

Program Name: Select a program name by clicking on the drop-down menu next to "Program Name" and choosing one of the available options (available options will be those entered and saved in the FD-1a subform).

Profession and Discipline of Faculty Trained:

- Select the profession(s) and discipline(s) of all faculty members who participated in each structured faculty development program during the annual reporting period by choosing all that apply from the following options.
- Select "Add Record"
- Repeat this process to capture the profession and discipline of all faculty members who participated in each structured faculty development program during the current annual reporting period.
- Behavioral Health Clinical Psychology
- Behavioral Health Marriage and Family Therapy
- Behavioral Health -Pastoral/Spiritual Care
- Dentistry Dental Hygiene

- Behavioral Health Clinical Social Work
- Behavioral Health Other Psychology
- Behavioral Health Psychology
- Dentistry Endodontic Dentistry
- Dentistry Orthodontic Dentistry
- Dentistry Pediatric Dentistry

- Behavioral Health Counseling Psychology
- Behavioral Health Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry Dental Assistant
- Dentistry General Dentistry
- Dentistry Other
- Dentistry Periodontic Dentistry

- Dentistry Oral Surgery Dentistry
- Dentistry Pathology Dentistry
- Dentistry Prosthodontic Dentistry
- Medicine Aerospace Medicine
- Medicine Colon and Rectal Surgery
- Medicine Family Medicine
- Medicine Geriatrics
- Medicine Internal Medicine/Family Medicine
- Medicine Neurological Surgery
- Medicine Obstetrics and Gynecology
- Medicine Orthopaedic Surgery
- Medicine Pathology -Anatomical and Clinical
- Medicine Plastic Surgery
- Medicine Preventive Medicine/Family Medicine
- Medicine Preventive Medicine/Pediatrics
- Medicine Radiation Oncology
- Medicine Thoracic Surgery
- Medicine Vascular Surgery Integrated
- Nursing CNS Adult gerontology
- Nursing CNS Neonatal
- Nursing CNS Women's health
- Nursing Home Health Aide
- Nursing NP Acute care pediatric
- Nursing NP Family

- Dentistry Public Health Dentistry
- Medicine Allergy and Immunology
- Medicine Dermatology
- Medicine General Preventive Medicine
- Medicine Integrative Medicine
- Medicine Internal Medicine/Pediatrics
- Medicine Neurology
- Medicine Occupational Medicine
- Medicine Other
- Medicine Pediatrics
- Medicine Plastic Surgery Integrated
- Medicine Preventive Medicine/Internal Medicine
- Medicine Preventive Medicine/Public Health
- Medicine Radiology Diagnostic
- Medicine Thoracic Surgery Integrated
- Nursing Alternative/Complementary Nursing
- Nursing CNS Family
- Nursing CNS Pediatrics
- Nursing CNS Women's health and pediatrics
- Nursing Licensed practical/vocational nurse (LPN/LVN)
- Nursing NP Adult gerontology
- Nursing NP Geropsychiatric
- Nursing NP Psychiatric/Mental health
- Nursing Nurse anesthetist
- Nursing Nurse informaticist
- Nursing Public health nurse

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- Dentistry Radiology Dentistry
- Medicine Anesthesiology
- Medicine Emergency Medicine
- Medicine Geriatric Psychiatry
- Medicine Internal Medicine
- Medicine Medical Genetics
- Medicine Nuclear Medicine
- Medicine Ophthalmology
- Medicine Otolaryngology
- Medicine Physical Medicine and Rehabilitation
- Medicine Preventive Medicine/Aerospace Medicine
- Medicine Preventive Medicine/Occupational Medicine
- Medicine Psychiatry
- Medicine Surgery General
- Medicine Urology
- Nursing CNL Generalist
- Nursing CNS Geropsychiatric
- Nursing CNS Psychiatric/Mental health
- Nursing Community health nursing
- Nursing NP Acute care adult gerontology
- Nursing NP Emergency care
- Nursing NP Neonatal
- Nursing NP Women's health
- Nursing Nurse Assistant/Patient Care Associate (PCA)
- Nursing Nurse midwife
- Nursing Registered Nurse
- Other Chiropractor
- Other Facility Administrator
- Other Health Informatics/Health Information Technology

- Nursing NP Pediatrics
- Nursing Nurse administrator
- Nursing Nurse educator
- Nursing Other (e.g., CNA, PCA)
- Nursing Researcher/Scientist
- Other Community Health Worker
- Other First Responder/EMT
- Other Home Health Aide
- Other Midwife (non nurse)
- Other Office/Support Staff
- Other Physical Therapy
- Other Respiratory Therapy
- Other Veterinary Medicine
- Public Health Disease Prevention & Health Promotion
- Public Health Health Policy & Management
- Public Health Social & Behavioral Sciences

- Other Allied Health
- Other Direct Service Worker
- Other Health Education Specialist
- Other Lay and Family Caregiver
- Other Nutritionist
- Other Optometry
- Other Podiatry
- Other Speech Therapy
- Physician Assistant
- Public Health Environmental Health
- Public Health Infectious Disease Control

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- Other Medical Assistant
- Other Occupational Therapy
- Other Pharmacy
- Other Profession Not Listed
- Other Unknown
- Public Health Biostatistics
- Public Health Epidemiology
- Public Health Injury Control & Prevention

FD-1b - Entering # Trained in the Profession and Discipline

No.	Program Name (1)	Profession and Discipline of Faculty Trained (2) Block 4	Enter # Trained in this Profession and Discipline (3) Block 4
1	Structured Program 1	Dentistry - General Dentistry	

Figure 83. FD-1b - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline:

- For each structured faculty development program, enter the number of faculty members in each profession/discipline who participated in the program during the current reporting period in the textbox in Column 3 (Block 4).
- Repeat this step as many times as necessary to capture the total number of faculty members by profession and discipline who participated in each structured program during the annual reporting period.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

FD-2a: Faculty Development - Faculty Development Activities

FD-2a - Entering Faculty Development Activities



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully



Figure 84. FD-2a - Entering Faculty Development Activities

Activity Name:

- Enter the name of each new unstructured faculty development program coordinated and/or supported through the grant during the current annual reporting period in Column 1 (Block 1)
- Select "Add Record"
- Repeat this process as necessary to enter each new structured faculty development program that was coordinated and/or supported through the grant during the current annual reporting period.

Warning: If a previously completed program (prior record) is being offered again with a new cohort, it will need to be re-created as a new record

FD-2a - Selecting Type of Faculty Development Activity Offered



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.



Figure 85. FD-2a - Selecting Type of Faculty Development Activity Offered

Select Type of Faculty Development Activity Offered: Select the type of faculty development activity supported and/or coordinated through the grant during the annual reporting period by clicking on the drop-down menu under Column 2 (Block 8) and choosing one of the following options:

- Academic Course for Continuing Education
- Clinical Rotation for Continuing Education
- Grand Rounds for Continuing Education
- Professional Conference
- Training/Workshop for Continuing Education

For Courses or Workshops: Select Whether Activity is Accredited for Continuing Education Credit:

- 1. For Academic Courses and Trainings/Workshops for Continuing Education (as selected in Column 2, Block 8): Select whether these activities are accredited for continuing education credit by clicking on the drop-down menu under Column 3 (Block 8a) and choosing one of the following options:
- 2. For Clinical Rotations and Grand Rounds for Continuing Education, as well as Professional Conferences (as selected in Column 2, Block 8), Select N/A for Column 3 (Block 8a)

- Yes
- No
- N/A

For Courses or Workshops: Select Whether Attendance was to Acquire or Maintain Professional Certification:

- 1. For Academic Courses and Trainings/Workshops for Continuing Education (as selected in Column 2, Block 8): Select whether attendance by faculty was for the purposes of acquiring or maintaining a professional certification by clicking on the drop-down menu under Column 4 (Block 8b) and choosing one of the following options:
- 2. For Clinical Rotations and Grand Rounds for Continuing Education, as well as Professional Conferences (as selected in Column 2, Block 8), Select N/A for Column 4 (Block 8b)
- Yes
- No
- N/A

FD-2a - Entering Duration of Training Activity



Figure 86. FD-2a - Entering Duration of Training Activity

Enter Duration of Training Activity in Clock Hours: Enter the duration (in clock hours) of each faculty development activity in the textbox in Column 5 (Block 9).

Note: For activities less than one (1) hour, provide a decimal value by dividing the total number of minutes the course lasted by 60. Example: a 15-minute course would entered as 15/60 = .25.

FD-2a - Selecting Delivery Mode



Figure 87. FD-2a - Selecting Delivery Mode

Select Delivery Mode Used to Offer Training Activity: Select the primary delivery mode used to offer each faculty development activity by clicking on the drop-down menu in Column 6 (Block 10) and choosing one of the following options:

- Archived/Self-paced distance learning
- Clinical Rotation
- Other

- Classroom-based
- Hybrid
- Real-time/Live distance learning

FD-2a - Selecting Faculty Role(s)



Figure 88. FD-2a - Selecting Faculty Role(s)

Select the Faculty Role(s) Addressed at Training Activity: Select the faculty role(s) addressed in each faculty development activity by clicking on the drop-down menu in Column 7 (Block 11) and choosing all that apply from the following options:

- Administrator
- Clinician
- Educator
- Researcher

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

FD-2b: Faculty Development - Faculty Trained By Profession/Discipline

FD-2b - Adding Profession and Discipline for Activities



Warning: Multiple steps are required to complete this portion of the subform. Please read instructions carefully.



Figure 89. FD-2b - Adding Profession and Discipline for Activities

Activity Name:

Profession and Discipline of Faculty Trained:

- Select the profession(s) and discipline(s) of all faculty members who participated in each faculty development program during the current reporting period by choosing all that apply from the following options.
- Select "Add Record".
- Repeat this process as necessary.
- Behavioral Health Clinical Psychology
- Behavioral Health Marriage and Family Therapy
- Behavioral Health -Pastoral/Spiritual Care
- Dentistry Dental Hygiene
- Dentistry Oral Surgery Dentistry
- Dentistry Pathology Dentistry

- Behavioral Health Clinical Social Work
- Behavioral Health Other Psychology
- Behavioral Health Psychology
- Dentistry Endodontic Dentistry
- Dentistry Orthodontic Dentistry
- Dentistry Pediatric Dentistry
- Dentistry Public Health Dentistry
- Medicine Allergy and Immunology

- Behavioral Health Counseling Psychology
- Behavioral Health Other Social Work, Substance Abuse/Addictions Counseling
- Dentistry Dental Assistant
- Dentistry General Dentistry
- Dentistry Other
- Dentistry Periodontic Dentistry
- Dentistry Radiology Dentistry
- Medicine Anesthesiology

- Dentistry Prosthodontic Dentistry
- Medicine Aerospace Medicine
- Medicine Colon and Rectal Surgery
- Medicine Family Medicine
- Medicine Geriatrics
- Medicine Internal Medicine/Family Medicine
- Medicine Neurological Surgery
- Medicine Obstetrics and Gynecology
- Medicine Orthopaedic Surgery
- Medicine Pathology -Anatomical and Clinical
- Medicine Plastic Surgery
- Medicine Preventive Medicine/Family Medicine
- Medicine Preventive Medicine/Pediatrics
- Medicine Radiation Oncology
- Medicine Thoracic Surgery
- Medicine Vascular Surgery Integrated
- Nursing CNS Adult gerontology
- Nursing CNS Neonatal
- Nursing CNS Women's health
- Nursing Home Health Aide
- Nursing NP Acute care pediatric
- Nursing NP Family
- Nursing NP Pediatrics
- Nursing Nurse administrator

- Medicine Dermatology
- Medicine General Preventive Medicine
- Medicine Integrative Medicine
- Medicine Internal Medicine/Pediatrics
- Medicine Neurology
- Medicine Occupational Medicine
- Medicine Other
- Medicine Pediatrics
- Medicine Plastic Surgery Integrated
- Medicine Preventive Medicine/Internal Medicine
- Medicine Preventive Medicine/Public Health
- Medicine Radiology Diagnostic
- Medicine Thoracic Surgery Integrated
- Nursing Alternative/Complementary Nursing
- Nursing CNS Family
- Nursing CNS Pediatrics
- Nursing CNS Women's health and pediatrics
- Nursing Licensed practical/vocational nurse (LPN/LVN)
- Nursing NP Adult gerontology
- Nursing NP Geropsychiatric
- Nursing NP Psychiatric/Mental health
- Nursing Nurse anesthetist
- Nursing Nurse informaticist
- Nursing Public health nurse
- Other Allied Health
- Other Direct Service Worker

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- Medicine Emergency Medicine
- Medicine Geriatric Psychiatry
- Medicine Internal Medicine
- Medicine Medical Genetics
- Medicine Nuclear Medicine
- Medicine Ophthalmology
- Medicine Otolaryngology
- Medicine Physical Medicine and Rehabilitation
- Medicine Preventive Medicine/Aerospace Medicine
- Medicine Preventive Medicine/Occupational Medicine
- Medicine Psychiatry
- Medicine Surgery General
- Medicine Urology
- Nursing CNL Generalist
- Nursing CNS Geropsychiatric
- Nursing CNS Psychiatric/Mental health
- Nursing Community health nursing
- Nursing NP Acute care adult gerontology
- Nursing NP Emergency care
- Nursing NP Neonatal
- Nursing NP Women's health
- Nursing Nurse Assistant/Patient Care Associate (PCA)
- Nursing Nurse midwife
- Nursing Registered Nurse
- Other Chiropractor
- Other Facility Administrator
- Other Health Informatics/Health Information Technology
- Other Medical Assistant
- Other Occupational Therapy

- Nursing Nurse educator
- Nursing Other (e.g., CNA, PCA)
- Nursing Researcher/Scientist
- Other Community Health Worker
- Other First Responder/EMT
- Other Home Health Aide
- Other Midwife (non nurse)
- Other Office/Support Staff
- Other Physical Therapy
- Other Respiratory Therapy
- Other Veterinary Medicine
- Public Health Disease Prevention & Health Promotion
- Public Health Health Policy & Management
- Public Health Social & Behavioral Sciences

- Other Health Education Specialist
- Other Lay and Family Caregiver
- Other Nutritionist
- Other Optometry
- Other Podiatry
- Other Speech Therapy
- Physician Assistant
- Public Health Environmental Health
- Public Health Infectious Disease Control

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- Other Pharmacy
- Other Profession Not Listed
- Other Unknown
- Public Health Biostatistics
- Public Health Epidemiology
- Public Health Injury Control & Prevention

FD-2b - Entering # Trained in the Profession and Discipline

No.	Activity Name (1)	Profession and Discipline of Faculty Trained (2) Block 12	Enter # Trained in this Profession and Discipline (3) Block 12
1	Activity 1	Dentistry - General Dentistry	

Figure 90. FD-2b - Entering # Trained in the Profession and Discipline

Enter # Trained in this Profession and Discipline:

- For each faculty development activity, **enter the number of faculty members in each profession/discipline** who participated in the program during the current reporting period in the textbox in Column 3 (Block 12).
- **Repeat this step** as many times as necessary to capture the total number of faculty members by profession and discipline who participated in each activity during the annual reporting period.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, the BPMH system will automatically route you to the next required subform.

FD-3 - Adding Faculty-Student Collaboration Projects



Warning: Multiple steps are required to complete this portion of the subform.



Figure 91. FD-3 - Adding Faculty-Student Collaboration Projects

Project Name:

Review Prior Records (Ongoing):

- The "Saved Projects" table will prepopulate with data from prior ongoing faculty-student research projects used in previous reporting periods.
- Review the programs available. If no additional faculty-student research projects were supported through the grant during the current annual reporting period other than prior records, proceed to FD-3, Step 1.

All New Records (Ongoing and Complete):

- 1. **Enter the name of each new faculty-student research project coordinated** and/or supported through the grant during the current annual reporting period
- 2. Select "Add Record"
- 3. **Repeat this process** as necessary to enter each new faculty-student research project that was coordinated and/or supported through the grant during the current annual reporting period.

FD-3 - Selecting Project Status

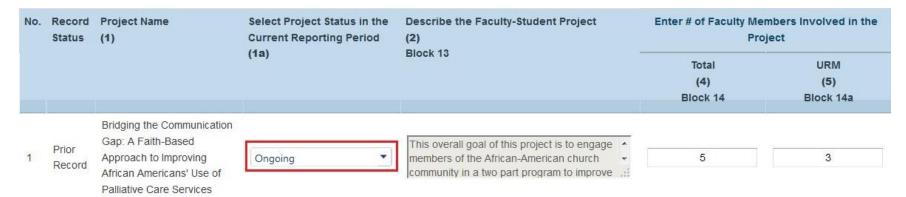


Figure 92. FD-3 - Selecting Project Status

Select Project Status in the Current Reporting Period: ALL Records(New and Prior) Select the status of each faculty-student research project at the end of the annual reporting period by clicking on the drop-down menu in Column 1a and choosing one of the following options:

Ongoing: A faculty-student research project that did not conclude by June 30, 2016.

Complete: A faculty-student research project that concluded at some point during the current annual reporting period (i.e. **July 01, 2015 - June 30, 2016**).

- Complete
- Ongoing

Warning: If no faculty-student research projects were supported through the grant during the annual reporting period, skip to the Final Steps for this subform.

Note: Select ongoing for a faculty-student research project that did not conclude by **June 30, 2016**.

Note: Select complete for a faculty-student research project that concluded at some point during the current annual reporting period (i.e. **July 01, 2015 - June 30, 2016**).

FD-3 - Entering Project Description



Figure 93. FD-3 - Entering Project Description

Describe the Faculty-Student Project: All New Records (*Ongoing and Complete*): Enter a **brief description** of each faculty-student research project in the textbox in Column 2 (Block 13).

Note: The maximum number of characters allowed is 1,000. It is recommended that grantees develop the description of each project in a word processor to ensure accurate spelling; and then cut and paste the finished description into the textbox.

FD-3 - Entering # of Faculty and Students Involved in the Project



Warning: Multiple steps are required to complete this portion of the subform.

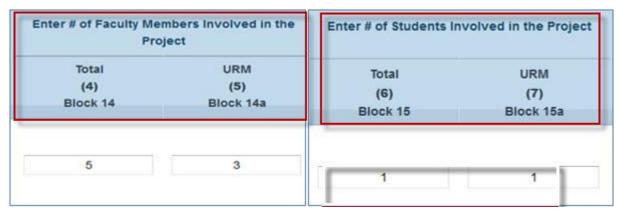


Figure 94. FD-3 - Entering # of Faculty and Students Involved in the Project

Enter # of Faculty Members Involved in the Project: Total: ALL Records(New and Prior): In Column 4 (Block 14), enter the total number of faculty involved in each faculty-student research project.

Enter # of Faculty Members Involved in the Project: URM: 2. In Column 5 (Block 14a), enter the total number of faculty involved in each specific project who are underrepresented minorities.

Enter # of Students Involved in the Project: Total: ALL Records (New and Prior): In Column 6 (Block 15), enter the total number of students involved in each faculty-student research project.

Enter # of Students Involved in the Project: URM: 2. In Column 7 (Block 15a), enter the total number of students involved in each specific project who are underrepresented minorities.

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Note: Block 14a is a subset of Block 14

Note: Block 15a is a subset of Block 15

Reference: Refer to the glossary for a definition of underrepresented minority.

FD-3 - Selecting whether Faculty Received BHW-Funded Financial Award



Figure 95. FD-3 - Selecting whether Faculty Received BHW-Funded Financial Award

Select whether any Faculty Received any type of BHW-Funded Financial Award: ALL Records (*New and Prior*): Select whether BHW-funded financial awards were provided to faculty who participated in each faculty-student research project during the annual reporting period by clicking on the drop-down menu in Column 8 (Block 16) and choosing **one** of the following options:

- Yes
- No

Warning: You must complete an IND-GEN subform for each faculty and/or student who received a BHW-funded financial award during the annual reporting period for participating in a faculty-student research project.

To Complete the Form: Click on the "Save and Validate" button located on the bottom right corner of your screen. If no errors are found, click on the "Submit" button in the left hand side of the EHB to begin the submission process of your PRGCA.

Printing Your Performance Report

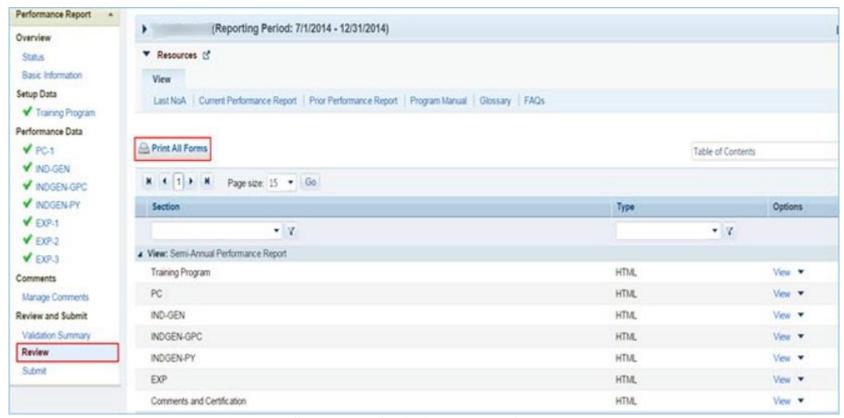


Figure 96. Screenshot of Printing Your Performance Report

- 1. To print the entire performance report, expand the left side menu of your report and click the 'Review' link under the 'Review and submit' section. You will be directed to the Review page.
- 2. Next, click the 'Print All Forms' button below the Resources section of the Review Page.

Submitting Your Performance Report

1. To submit your performance report, expand the left side menu of your report and click the 'Submit' link under the 'Review and submit' section. You will be directed to the Submit Report. On the Submit Report page, ensure that the status of all forms is 'Complete' with a green check mark. Click the 'Submit' button on the bottom right corner of this page.

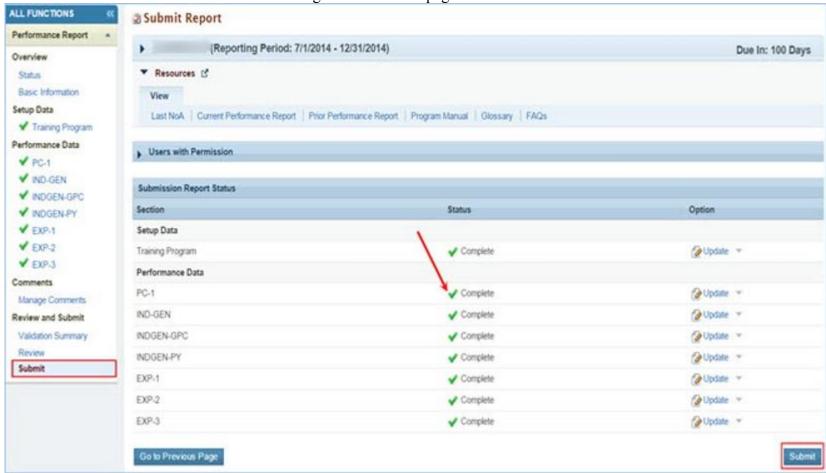


Figure 97. Screenshot of the Submit Report Page

2. After step 1, you will be directed to the Submit Report-Confirm page. On this page, check the box under the 'Certification' section and click the 'Confirm' button on the bottom right corner of your screen to submit your report to HRSA. You will receive a confirmation message on your next screen.



Figure 98. Screenshot of the Submit Report - Confirm Page



Figure 99. Screenshot of the Submit Report - Confirm Page

Appendix A: Glossary

This glossary contains general definitions for terms that are used throughout the BPMH system. Some terms may be defined in multiple ways by different programs due to their authorizing statutes and/or the nature of training activities offered. If you are unsure about how to define a term that is central to your program, please refer to the authorizing statute, the Funding Opportunity Announcement and/or your Government Project Officer for clarification.

Attrition is the act of permanently leaving a training program or training activity before completion. An individual is counted as having attrited if s/he leaves a training program or training activity for any reason before completing all training requirements.

BHW-funded financial awards are monies from a grant funded by BHW that are provided to an individual by a grantee institution or organization for the purposes of defraying costs associated with participation in a training program or training activity. The types and definitions of BHW-funded financial awards are listed below:

- 1. **Career Award**: A financial award provided to current faculty for the purposes of facilitating professional growth and advancement in the academic setting.
- 2. **Fellowship**: A financial award provided to a Fellow for the purposes of defraying costs associated with advanced training in a specific content area.
- 3. **Scholarship**: A financial award provided to a student enrolled in a degree program at an educational institution for the sole purpose of covering expenses associated with tuition.
- 4. **Stipend**: A financial award provided to an individual for the purposes of defraying costs associated with a training program or training activity.
- 5. **Traineeship**: A financial award provided to a student enrolled in an advanced training program at an educational institution for the purposes of defraying costs associated with advanced training in a specific content area.
- 6. **Loan**: A financial award provided to a student enrolled in a degree program at an educational institution for the purposes of defraying costs associated with that degree program. Loans must be repaid in accordance with terms specified in a promissory note.
- 7. **Loan Repayment**: A financial award provided to an individual that is conditional on their agreement to provide specific types of services for a specified amount of time. Under this agreement, an individual may have part or all of their student loans paid off so long as they meet all specified requirements.

Campus-based degree program is a degree program that requires students to complete all academic coursework at the college or university campus.

Contact hours are the number of hours that an individual receives training in a specific setting.

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Continuing education is a training activity or series of training activities offered to members of the **current** workforce who have already completed a training program in their profession. Generally, continuing education sessions are offered to existing professionals and do not include or target students as primary participants.

Curriculum is the aggregate content of multiple learning activities offered by an organization a specific topic area. Commonly, the term curriculum is used to describe the number and type of academic courses within a degree program. The term can also be used to describe the number and type of learning activities for faculty and other non-degree related training programs.

Didactic training is the process of instruction between a designated faculty and an individual or group of individuals.

Direct financial support program is a type of grant that provides individuals, via grantee organizations, with a BHW-funded financial award to help defray costs associated with participation in a training program or training activity.

Disadvantaged background is a citizen, national, or a lawful permanent resident of the United States or the District of Columbia, the Commonwealths of Puerto Rico or the Marianas Islands, the Virgin Islands, Guam, the American Samoa, the Trust Territory of the Pacific Islands, the Republic of Palau, the Republic of the Marshall Islands and the Federated State of Micronesia who either:

- Comes from an environment that has inhibited the individual from obtaining the knowledge, skill, and abilities required to enroll in and graduate from a health professions school, or from a program providing education or training in an allied health profession; OR
- Comes from a family with an annual income below a level based on low income thresholds according to family size published by the U.S. Bureau of Census, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary, HHS, for use in health professions and nursing programs.

Enhanced course or other training activity is a specific type of training activity that was in existence at the grantee institution or organization and has been modified or restructured as part of the grant project.

Enrollee is an individual who is actively matriculated or registered in a training program or training activity. For the purposes of performance reporting, the training category of "enrollees" does not include graduates, program completers, fellows or residents.

Ethnicity is the ethnic ancestry or origin of an individual or group of individuals. For the purposes of performance reporting, the Office of Management and Budget requires that ethnicity be classified as "Hispanic or Latino Origin" and "Non-Hispanic or Latino Origin". Individuals identifying as "Hispanic or Latino" are of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

Experiential training is the process of instruction between a designated faculty and an individual or group of individuals that includes a component of direct work experience.

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Faculty is an individual or group of individuals who have been deemed qualified by an organization to provide instruction to others on a specific topic area.

Faculty development program is a series of curriculum-based training activities that are provided to faculty over a specific amount of time for the purposes of additional training and/or faculty development. Structured faculty development programs can be degree-bearing, certificate-bearing and do not necessarily have to be offered at or by the grantee institution or organization.

Faculty development activity is generally a stand-alone single training activity provided to faculty for the purposes of additional training and/or faculty development. Faculty development activities can include conferences, workshops or grand rounds and do not necessarily have to be offered at or by the grantee institution or organization. It is the same as an "Unstructured faculty development activity".

Faculty instruction are those courses, workshops, seminars, grand rounds or other training activities that are led by faculty for the purposes of providing training to other individuals (e.g., students, fellows, residents). Faculty instruction does not refer to training activities undertaken by faculty for the purposes of additional training or faculty development (see Structured Faculty Development Program and/or Unstructured Faculty Development Activity).

Federally Qualified Health Centers (FQHC) are public and private non-profit health care organizations that meet certain criteria under the Medicare and Medicaid Programs (respectively, Sections 1861(aa)(4) and 1905(l)(2)(B) of the Social Security Act and receive funds under the Health Center Program (Section 330 of the Public Health Service Act).

Fellowship is a training program that provides an individual or group of individuals (known as "fellows") with advanced training in a general content area. Fellows generally receive a financial award to help defray costs associated with advanced training (also referred to as a "fellowship").

Full-time refers to the number of days per week and/or months per year representing full-time effort at the applicant/recipient organization, as specified in organizational policy. For a student, it means a student who is enrolled full-time as defined by the organization. The organization's policy must be applied consistently, regardless of the source of support.

Graduate is an individual who has completed all requirements for a degree-bearing training program at an educational institution.

Hybrid degree program is a degree program that requires students to complete academic coursework at the campus, as well as through distance learning.

Instructional hours are the duration of a training activity or training program in clock hours.

Infrastructure program is a type of grant designed to enhance the scope, quality, and opportunities for health professions training programs or training activities. Infrastructure programs do not provide individuals with any type of BHW-funded financial awards.

Internship is a type of training activity that can either be a(n): a) component of a degree-bearing program or b) entry-level employment that provides an individual with relevant workforce experience.

Interprofessional education is the process of learning among a group of individuals from two (2) or more professions.

Interprofessional practice is the provision of care or services to an individual or group of individuals by workers from two (2) or more professions.

Medically Underserved Community (MUC) is a geographic location or population of individuals that is eligible for designation by a state and/or the federal government as a health professions shortage area (HPSA); medically underserved area (MUA) and/or medically underserved population (MUP). These communities have limited access to primary health care services. The term MUC is an umbrella term that can be used to describe any location that meets one or more of the previously identified designations.

Multipurpose/Hybrid program is a type of grant that is designed to: a) provide individuals, via grantee organizations, with a BHW-funded financial award to help defray costs associated with health professions training; and b) enhance the scope, quality, and opportunities for health professions training programs or training activities.

Newly developed course or other training activity is a specific type of training activity that was not in existence at the grantee institution or organization and was developed in its entirety as part of the grant project.

Online degree program is a degree program that requires students to complete all academic coursework through distance learning.

Partner/consortium is an organization or group of organizations that provide(s) resources and/or support to grantees for the implementation of training programs and/or training activities.

Patient encounter is a direct interaction between a designated caregiver and a patient for the purposes of health care.

Practicum is a type of experiential training activity. (See "Experiential training").

Primary care is the provision of integrated, accessible health services by clinicians who are accountable for addressing a large majority of personal health care needs, developing a sustained partnership with patients, and practicing in the context of family and community.

Primary care setting is a facility that is staffed with professionals who provide primary care. (See "Primary Care")

Profession & discipline is a phrase that identifies a general occupation (profession) and, where applicable, a type of specialty within that occupation (discipline).

Program completer is an individual who has completed all requirements for a non-degree bearing training program or training activity. (See "Graduate" for individuals who complete all requirements of a degree-bearing training program)

Publication is a written material that has been submitted to and accepted by a publishing authority as part of a collection of related work.

Race is an individual's self-identified affiliation with one (1) or more of the following origins:

- White A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American A person having origins in any of the Black racial groups of Africa.
- American Indian or Alaska Native A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- Asian A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian or Other Pacific Islander A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Residency is a training program that provides an individual or group of individuals (known as "residents") with advanced clinical training in a specialty area.

Residential background is/are the type/s of location/s an individual has established residence in.

Rural is a geographical area that is not part of a Metropolitan Statistical Area (MSA). *Note: To determine if a specific geographical area is considered rural, go to <u>HRSA's Office of Rural Health Policy</u>.*

Structured training program is a series of curriculum-based training activities that are provided to an individual or groups of individuals over a specific amount of time.

Trainee is an individual who participates in a training program or training activity.

Underrepresented Minority (URM) is an individual from a racial and/or ethnic group that is considered inadequately represented in a specific profession relative to the numbers of that racial and/or ethnic group in the general population. Note: For the purposes of the health professions, BHW considers individuals who are from the following racial and ethnic backgrounds to be underrepresented:

- Black or African American
- Hispanic (all races)
- Native Hawaiian or Other Pacific Islander

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American Indian or Alaska Native

Unstructured faculty development activity is generally a stand-alone single training activity provided to faculty for the purposes of additional training and/or faculty development. Unstructured faculty development activities can include conferences, workshops, or grand rounds and do not necessarily have to be offered at or by the grantee institution or organization.

Unstructured training activity is generally a stand-alone single training activity that is not part of a curriculum.

Veteran is any person who served in one (1) of the seven (7) uniformed services of the United States. The seven uniform services include: the United States Army, Navy, Air Force, Marines, Coast Guard, Public Health Service, and National Oceanic & Atmospheric Administration Commissioned Officers Corps.

Vulnerable populations are groups of individuals at higher risk for health disparities by virtue of their race or ethnicity, socio-economic status, geography, gender, age, disability status, and other risk factors associated with sex and gender.

Appendix B: FAQs

General FAQs:

Q1: When is the due date for the performance report?

A1: Performance reports are due by **August 01, 2016** for all programs. No extensions will be granted beyond this date. Failure to submit a performance report by your due date may place your grant in a non-compliant status.

Q2: What dates does the performance report cover?

A2: The performance report submitted by grantees should cover all activities conducted through the grant for the period **July 01, 2015 - June 30, 2016**.

Q3: Is it possible to change data entered incorrectly in a prior reporting period?

A3: No. Data entered in a previous reporting period cannot be edited. It is important that grantees endeavor to provide the most accurate data during each reporting period.

FAQs about the Program Characteristics (PC) forms:

Q4: Do I need to set up my training program again if it is being reused in the current reporting period?

A4: No. If you previously reported on a training program, you do not need to set up the program again. All of your previously used training programs will be displayed in your training program setup menu with a record status of 'Prior Record' displayed.

Q5: What are the status options for the different types of programs?

A5: Structured and Unstructured Training programs use program status options of "Ongoing" or "Complete." All other types of training programs (degree/certificate, internships, fellowships, 1-year retraining, practica/field placements, and residencies) use the status options of "Active" and "Inactive."

Q6: In the PC forms, do we count all trainees in our program regardless of the year of study; include full-time/part-time trainees, etc.?

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A6: Yes, as long as trainees are enrolled or participating in the training program identified under Block 1.

Q7: Are we required to provide this information only on the trainees in the programs we received funding for?

A7: The PC tables capture information about the universe of trainees regardless of funding status at your school. This is the only form that collects this type of information in aggregate.

FAQs about the LR-1 through DV-3 forms:

Q8: In prior reports, the LR-1, LR-2 and DV tables reported unduplicated counts. In this current reporting format, will we be reporting duplicated counts for those tables?

A8: The new format requires grantees to provide counts by training program. While we understand that an individual may participate in multiple programs offered by grantees, this new approach will allow us to better understand each program separately.

Q9: In the LR- and DV- tables, are the counts for graduates and/or program completers a subset of the total trainee number or are they to be reported separately?

A9: On the LR- and DV- forms, graduates and program completers are not reported as a subset of the current trainee total. Please report aggregate counts of trainees (e.g., enrollees, residents, and fellows) SEPARATELY from the aggregate counts of graduates or program completers.

Q10: What address should we use to determine if an individual is considered to come from a rural residential background? Do we consider a student's high school address, medical school address or childhood home address?

A10: It depends on the information available. The definition of rural residential background is based on whether an individual has ever lived in a rural area. Grantees may choose to use the address prior to matriculation or the institution's address.

FAQs about the INDGEN form:

Q11: Where do we get the Trainee Unique ID?

A11: Grantees are responsible for developing a unique ID for each individual for which an INDGEN entry is required. Grantees must keep a log of these unique IDs in order to provide 1-year follow-up updates through the BPMH system.

Q12: What are the characters of the 7 digit unique ID?

A12: Each unique ID must be made up of 7 alphanumeric characters (meaning that, you may use a combination of both letters and numbers).

Q13: Are INDGEN records from the last reporting period stored in the EHB?

A13: It depends. All INDGEN records that were reported during prior reporting periods will be shown in your INDGEN table as 'Prior Records' until (a) the record is marked as a graduate/ program completer, or (b) the individual permanently discontinues participation in the training program (i.e., attrition). Any INDGEN record that was marked as having graduated or completed will be transferred into INDGEN-PY for the next reporting period. INDGEN records for individuals who permanently discontinued training will not re-populate in EHB in the next reporting period.

Q14: Last year we created individual participant codes (Unique IDs) to be included in the INDGEN table. If any of those participants attend a new training cycle this year, should we use the same code for that participant, or create a new code for that participant? Are those codes needed this year?

A14: The purpose of the Unique ID is to track an individual's training participation over time. If the same individual is simultaneously participating in multiple training programs, you should use the same unique ID. Note that each training program must also have a unique name. The same unique ID-training program combination cannot be present in more than one location (INDGEN/INDGEN-PY).

Q15: What if an individual already listed on INDGEN did not receive a financial award during the six month reporting period?

A15: If an individual from a prior record did not receive a financial award during the current reporting period, please indicate this under Block 11. The record will remain on INDGEN until this individual is marked as a graduate/program completer or a drop-out of the training program.

Q16: Is there an option to report Ethnicity as unknown?

A16: No. While there is an option for "Not Reported" on the INDGEN form, grantees are expected to collect race and ethnicity data on each individual for whom an INDGEN entry is required. If the option of "Not Reported" is selected for an individual's race, ethnicity or any other of the core demographic variables, it is expected that the grantee will collect this information and provide an update by the next reporting period.

Q17: Is reporting the underrepresented Asian distinction no longer included? The loss of the Asian Underrepresented category is a real loss to describing the diversity of our enrollees and their under-representation in medicine – any suggestions on how we can still express this diversity within our report?

A17: The definition of an underrepresented minority (URM) included in the instruction manuals specifically states that a URM is "is an individual from a racial and/or ethnic group that is considered inadequately represented in a specific profession relative to the numbers of that racial and/or ethnic group in the general population". While some professional or accrediting organizations collect detailed information on Asian subpopulations, data sources for the general population (i.e., the Census) do not. Therefore, it is not possible to determine that specific Asian subpopulations are underrepresented relative to the general population. Furthermore, federal agencies have been directed by the Office of Management and Budget to

collect race/ethnicity data in a manner consistent with that used for the Census. As a result, all race and ethnicity categories displayed in the INDGEN sub-form are identical to those used in the Census.

Q18: Can we use our institutions definitions/standards for disadvantaged background?

A18: The BHW definition of disadvantaged background is included in the glossary of each instruction manual. As long as an institution's definition or standard does not contradict the federal definition of disadvantaged, then grantees may choose to count individuals who have been deemed disadvantaged by the institution. Otherwise, you must use the definition for disadvantaged background located in your program manual glossary.

Q19: Do we report full time faculty who receive salary support for teaching or administrative responsibilities?

A19: It depends on whether a specific faculty member is part of the project. For project staff (including faculty), this information is not required as it is captured in your grant's budget documents.

Q20: Do conference registration fees count as financial support?

A20: Yes, but only for non-project staff.

Q21: How do we find out an individual's family income?

A21: The institution's financial aid office should have that information, as part of the required application for financial aid.

Q22: For veteran status, are we asking only for the student or trainee's status, or the trainee's family status (e.g. dependent of veteran, spouse of veteran, etc.)?

A22: Only the trainee's status should be reported.

Q23: How is the academic year funding total calculated?

A23: The academic year total is automatically calculated in EHB as the sum of funding during the academic year. When you enter, save, and validate the funding amount for the current reporting period, the academic year total will automatically populate.

Q24: How is the cumulative funding total calculated?

A24: The cumulative funding total is automatically re-calculated each annual reporting period in EHB. This is the total of each annual amount that has been entered for the individual record either (a) across the life of the grant or (b) since the BPMH system has been in use starting with Academic Year 2012-2013.

Health Resources and Services Administration Bureau of Health Workforce FAQs about the INDGEN-PY form:

Q25: How do I use the INDGEN-PY form?

A25: One year after an INDGEN record is marked as a graduate/program completer, you will be asked to provide an update on the individual's employment/enrollment status.

FAQs about the Experiential Training (EXP) forms:

Q26: What training sites do I need to report on this form? Is it all of the sites our program uses?

A26: Grantees should report only on sites used to provide training to students, trainees, or faculty supported by the grant during the current reporting period.

Q27: Our hospital provides multiple training sites for our trainees. Do I list the hospital or the specific clinics and offices within the hospital?

A27: You should list the specific clinics and offices within the hospital that provide training to supported trainees for the EXP forms.

Q28: Do I need to list a site more than once on EXP-2?

A28: You may need to list a site multiple times on the EXP-2 form. For sites that provide training to students, trainees and faculty from different training programs, it should be listed on the form for each training program the grant sponsors.

Q29: How can I report Interprofessional team-based care at the training sites?

A29: Interprofessional team-based care reporting is a three-step process on the EXP-3 form. After identifying the training program and site, the first step is to select ALL of the professions and disciplines represented on the interprofessional team (including the profession of the principal-HRSA sponsored trainees). The second step is to provide the number of trainees (by discipline) who were trained by the HRSA-sponsored program (principal trainees). The final step is to provide the number of other trainees (by discipline) who were trained at the site, alongside the principal trainees, but were not enrolled in the HRSA-sponsored program.

FAQs about the Curriculum Development and Enhancement (CDE) forms:

Q30: What if courses are created with a variety of funding sources?

A30: Grantees should complete a CDE-1 entry for each course or training activity that was developed or enhanced using any amount of HRSA grant funds.

Q31: Why do only some of the courses I entered last time appear in the CDE-1 form this time?

A:31 Only courses that were marked as 'Under Development' or 'Developed but Not Yet Implemented' will pre-populate the CDE-1 table. Courses marked as 'Implemented' will pre-populate the new CDE-1a table.

Q32: For CDE-2, do we report on all attendees or only those directly funded by a BHW-funded program for this reporting period?

A32: For the purposes of the CDE-2 form, count all individuals trained (whether or not the individuals received direct financial support) through courses or training activities developed or enhanced using any BHW funds during the current reporting period.

FAQs about the Faculty Development (FD) forms:

Q33: What is the difference between a structured faculty development program and an unstructured faculty development activity?

A33: Structured and unstructured faculty development programs differ in a few ways. Generally, structured faculty development programs are administered over a longer period of time and involve multiple meetings/sessions. Additionally, structured programs tend to be curriculum-driven, and may lead to the conferral of a degree or certificate. In contrast, unstructured faculty development activities are shorter in duration, and are single, stand-alone trainings. Faculty development activities include conferences, workshops, and grand rounds.

FAQs about the Continuing Education (CE) forms:

Q34: For CE-2, do we report on all attendees or only those directly funded by a BHW-funded program for this reporting period?

A34: For the purposes of the CE-2 form, count all individuals trained (whether or not the individuals received direct financial support) through courses or training activities developed or enhanced using any BHW funds during the current reporting period. Individuals attending CE trainings should be current providers, rather than students.

FAQs about Technical Support & Assistance:

Q35: Who do we contact if we need technical assistance entering data in EHB?

A35: Grantees should contact HRSA's Call Center for any type of questions related to the performance report. The Call Center can be reached via phone at 1-877-464-4772.

Q36: Where will grantees be able to locate the instruction manuals for the performance reports?

A36: Grantees will be able to access their program-specific instruction manual through the EHB. In addition, the manuals will be posted on the BHW grants website at http://bhw.hrsa.gov/grants/reporting/index.html.

Q37: Is there a way to look at the data forms required for my program without logging into EHB?

A37: Yes. Grantees will be able to view a program-specific overview of the required performance measure forms on the BHW grants website at http://bhw.hrsa.gov/grants/reporting/index.html.

Q38: Are reports from prior years stored in the EHBs?

A38: Yes. Grantees can locate reports from prior reporting periods in EHB by using any of the following methods:

- a) Clicking the 'view prior period data' link within a form or under your Resources tab;
- b) Going into your grant folder and searching for previously completed reports; or
- c) Clicking on the "submissions" link in the left side navigation menu.

Q39: Will the information we are submitting in this reporting period be automatically used to populate the forms in the future?

A39: Yes. Depending on the form, certain data fields will prepopulate for future reporting periods based on the data you enter when the record is initially created. For example, information reported on the EXP-1 and EXP-2 forms for training sites used will carry over each reporting period. Similarly, much of the information reported on the INDGEN form will also carry over each reporting period until the individual completes their specific training program or permanently leaves before completion.